

www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT							
CHECK PAYABLE TO THE ABCC	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE NAME OF							
CHECK NUMBER:							
IF USED, EPAY CONFIRMATION	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24501 LICENSE NAME: 2 FLY, LLC						
LICENSE NUMBER: C24501							
LICENSE NAME: 2 FLY, LLC							
ADDRESS: 10A ROSENTHAL ST	ADDRESS: 10A ROSENTHAL STREET EAST						
CITY: HARTFORD		STATE: CT					
ZIP CODE: 06108 COUI	NTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPLIANCE LESS THAN 5000 CASES	\$200.00						

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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(M.G.L. c. 138 §18B)

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, LLC,	PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C25	5490			
LICENSE NAME: 20576	11 ONTARIO LTD			
ADDRESS: RUE GASTO	N, CHEVROLET BP49 21202			
CITY:		STATE:		
ZIP CODE:	COUNTRY: CANADA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	1 513				
LICENSE NAME: 40401	CORPORATION				
ADDRESS: 1213 RESHE	CO DRIVE				
CITY: ERIE		STATE: PA			
ZIP CODE: 16501	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	# OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS					

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CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	1331			
LICENSE NAME: 57 MA	IN STREET IMPORTS			
ADDRESS: 302 ADAMS	BLVD			
CITY: FARMINGDALE		STATE: NY		
ZIP CODE: 11735	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	MATION NUMBER:						
LICENSE NUMBER: C2	4768						
LICENSE NAME: 6 & 6	TRADING CO., INC						
ADDRESS: 2175 GOOD	YEAR AVE						
CITY: VENTURA		STATE: CA					
ZIP CODE: 93003	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2802			
LICENSE NAME: 888 IN	IPORTS, LLC			
ADDRESS: 114 10TH SE	HIGH RIVER SE			
CITY: ALBERTA		STATE:		
ZIP CODE: T1V 1M7	COUNTRY: CANADA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:			
LICENSE NUMBER: C23	3006			
LICENSE NAME: A TO Z	WINEWORKS, LLC			
ADDRESS: 2900 PRING	LE RD			
CITY: SALEM		STATE: OR		
ZIP CODE: 97302	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE	NAME OF THE LICEN	ISEE CORPORATION, LLC, PA	RTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMB	ER:			
LICENSE NUMBER: C23	3931				
LICENSE NAME: ABACE	LA VINEYARDS	& WINERY			
ADDRESS: 2900 PRING	LE RD., SE	#100			
CITY: SALEM			STATE: OR		
ZIP CODE: 97302	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL		\$200.00]

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CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	4743				
LICENSE NAME: ABRAH	HIM SALCH				
ADDRESS: 65 WILD STR	REET				
CITY: PROVIDENCE		STATE: RI			
ZIP CODE: 02906	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, I	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: CO	517			
LICENSE NAME: ADEGA	A COOPERATIVA DE BORBA			
ADDRESS: APARTADO,	20-7150			
CITY: BORBA		STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C29	936			
LICENSE NAME: ADEGA	COOPERATIVA DO REDONI	00		
ADDRESS: APARTADO 2	26-7170-999			
CITY: REDONDO ALENT	E JO	STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	5100			
LICENSE NAME: AE WIN	NES, LLC			
ADDRESS: 2220 91ST ST	TREET			
CITY: NORTH BERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4640			
LICENSE NAME: AKA W	VINES, LLC			
ADDRESS: 20580 EIGTH	H STREET EAST			
CITY: SONOMA		STATE: CA		
ZIP CODE: 95476	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	203			
LICENSE NAME: ALLTEC	H, INC			
ADDRESS: 401 CROSS S	TREET			
CITY: NICHOLASVILLE		STATE: KY		
ZIP CODE: 40356	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2742			
LICENSE NAME: ALTO I	BODEGAS Y VINDEDOS			
ADDRESS: VALLADOLIE	O 47360			
CITY:		STATE:		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1912			
LICENSE NAME: AMBR	A TRADING, LLC			
ADDRESS: 241 CALCUT	TA STREET			
CITY: NEWARK		STATE: NJ		
ZIP CODE: 07114	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C2	5166				
LICENSE NAME: AMER	ICAN VINTAGE BEV	ERAGE, INC			
ADDRESS: 110 BARLEY	PARK LANE				
CITY: MOORESVILLE		s	STATE: NC		
ZIP CODE: 28115	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u> </u>	EEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	00.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICEN	SEE CORPORATION, LLC,	PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMB	ER:			
LICENSE NUMBER: C2	5172				
LICENSE NAME: AMER	ICAN VINTAGE B	BEVERAGE, INC			
ADDRESS: 19005 64TH	AVE	SOUTH			
CITY: KENT			STATE: WA		
ZIP CODE: 98032	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL	-	\$200.00			

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5285			
LICENSE NAME: AMER	ICAN WINE DIST			
ADDRESS: 2000 BENNE	ETT RD			
CITY: PHILA		STATE: PA		
ZIP CODE: 94080	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRM	ATION NUMBER:			
LICENSE NUMBER: C252	58			
LICENSE NAME: AMERICA	AN-NORDIC TRADING CO.	,		
ADDRESS: 2517 FAIRWA	Y PARK DR STE 216			
CITY: HOUSTON		STATE: TX		
ZIP CODE: 77092	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3470			
LICENSE NAME: ANDEI	RS-LANE ARTISAN WINES, L.P			
ADDRESS: 1480 EAST N	MAIN STREET			
CITY: MORGAN HILL		STATE: CA		
ZIP CODE: 95037	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C23	3546				
LICENSE NAME: ANDEF	RSON'S CONN VALLEY	WINERY			
ADDRESS: 422 LAFATA	ST.				
CITY: ST. HELENA		s ⁻	ГАТЕ: СА		
ZIP CODE: 94574	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	<u> </u>	FOF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS		0			

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1786			
LICENSE NAME: ANDRE	ULMER			
ADDRESS: 2220 91ST				
CITY: NORTH BERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C22	2887			
LICENSE NAME: ANHEL	USER-BUSCH, LLC			
ADDRESS: 1607 SOUTH	I 12TH STREET			
CITY: PRINCETON		STATE: MN		
ZIP CODE: 55371	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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(CHECK MUST DENOTE THE								
CHECK NUMBER:	CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	4335							
LICENSE NAME: ANTER	RRA							
ADDRESS: 431 GATEW	AY ROAD WEST							
CITY: NAPA		STATE: CA						
ZIP CODE: 94558	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
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CHECK NUMBER:								
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	1540							
LICENSE NAME: ARBIOS	LICENSE NAME: ARBIOS WINES LTD							
ADDRESS: 1010 SHILOH	ł RD							
CITY: WINDSOR		STATE: CA						
ZIP CODE: 95492	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI								
CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
(CHECK MUST DENOTE THE								
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C22	2599							
LICENSE NAME: ARCAI	DIA BREWING, CO							
ADDRESS: 103 MICHIG	AN AVE W.							
CITY: BATTLE CREEK		STATE: MI						
ZIP CODE:	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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CHECK PAYABLE TO THE AB	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
(CHECK MUST DENOTE THE NAME								
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:							
IF USED, EPAY CONFIRMAT								
LICENSE NUMBER: C24614								
LICENSE NAME: ARCANA, L	LC							
ADDRESS: 1200 GREEN ISLA	ND RD							
CITY: AMERICAN CANYON		STATE: CA						
ZIP CODE: 94503 CO	OUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPLIANCI LESS THAN 5000 CASES	\$200.00							

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(CHECK MUST DENOTE THE I								
CHECK NUMBER:								
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C23	3173							
LICENSE NAME: ARME	NIA EXPORT LTDA							
ADDRESS: CAMINO A F	ROMERAL KM 0. 7							
CITY: CURICO		STATE:						
ZIP CODE: 193	COUNTRY: CHILE							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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(CHECK MUST DENOTE THE NA								
CHECK NUMBER:	CHECK NUMBER:							
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C238	376							
LICENSE NAME: ASPECT	WINES, LLC							
ADDRESS: 566 MINNESO	OTA STREET							
CITY: SAN FRANCISCO		STATE: CA						
ZIP CODE: 94107	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE								

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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C3717							
LICENSE NUMBER: C3								
LICENSE NAME: AUGU	ST SCHELL BREWING, CO.							
ADDRESS: 1860 SCHEL	L ROAD							
CITY: NEW ULM		STATE: MN						
ZIP CODE: 56073	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4535			
LICENSE NAME: AZZUF	RRI IMPORTS, LLC			
ADDRESS: 909 BREEZE	WICK RD			
CITY: BALTIMORE		STATE: MD		
ZIP CODE: 21286	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24925 LICENSE NAME: BACIO DIVINO CELLARS, LLC							
LICENSE NAME: BACIO								
ADDRESS: 770 SKYWA	Y COURT							
CITY: NAPA		STATE: CA						
ZIP CODE: 94558	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:							
IF USED, EPAY CONFIRI							
LICENSE NUMBER: C24	1595						
LICENSE NAME: BANTE	LICENSE NAME: BANTEGNIES & FILS						
ADDRESS: 33820 CUBN	ADDRESS: 33820 CUBNEZAIS						
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL	IANCE \$200.00						
LESS THAN 5000 CAS	•						

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(CHECK MUST DENOTE THE I	NAME OF THE LICEN	NSEE CORPORATION, LLC, PAI	RTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:								
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	4723							
LICENSE NAME: BARRI	ER BREWING CO	O., LLC						
ADDRESS: 3595 LAWSO	ON BLVD	UNIT E						
CITY: OCEANSIDE			STATE: NY					
ZIP CODE: 11572	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL	_	\$200.00						

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4617			
LICENSE NAME: BARRY	Y WAITTE			
ADDRESS: 644 HANA S	TREET			
CITY: AMERICAN CANY	/ON	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C10	0073			
LICENSE NAME: BELLE \	VALLE'E CELLARS, LLC			
ADDRESS: 175 TOWER	RD			
CITY: NAPA		STATE: CA		
ZIP CODE: 94558	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2:	1077			
LICENSE NAME: BERAR	RDENGA FELSINA - FELSINA			
ADDRESS: 101/53019	CASTELNOUVO BERADENGA	A		
CITY: SIENA		STATE: ITALY		
ZIP CODE:	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	E ABCC OR COMMONW	EALTH OF MA:				
(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPO	DRATION, LLC, PARTNERSHIP OR INDIVI	DUAL)			
CHECK NUMBER:						
IF USED, EPAY CONFIRE	MATION NUMBER:					
LICENSE NUMBER: C31	LICENSE NUMBER: C3190					
LICENSE NAME: BETTER	R BRAND INT/MICHAEL	POZZA				
ADDRESS: NAPA WINE	CO 7830-	-40 ST HELENA HWY				
CITY: ST HELENA		STATE: CA				
ZIP CODE: 94574	COUNTRY:					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>cost</u>			
CERTIFICATES OF COMPLI LESS THAN 5000 CASI						

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	'H OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5210			
LICENSE NAME: BEVER	AGE ALLIANCE, LLC			
ADDRESS: 51 LOCUST A	AVE			
CITY: NEW CANAAN		STATE: CT		
ZIP CODE: 06840	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH					
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:					
IF USED, EPAY CONFIRI					
LICENSE NUMBER: C22					
LICENSE NAME: BINDIN	NG BAUEREI USA, INC.				
ADDRESS: 270 53 KRUS	SOVIC				
CITY:		STATE:			
ZIP CODE:	COUNTRY: CZECH REPUBLIC	:			
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>		
CERTIFICATES OF COMPL					
LESS THAN 5000 CAS	ES		<u> </u>		

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5140			
LICENSE NAME: BIRRA	KORCA, SHPK			
ADDRESS: 1 BULEVARD	DI FAN NOLI			
CITY: KORCE		STATE:		
ZIP CODE:	COUNTRY: ALBANIA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	191			
LICENSE NAME: BLACK	DIAMOND SPIRITS, LLC			
ADDRESS: 381 MALLOR	Y STATION RD STE 211			
CITY: FRANKLIN		STATE: TN		
ZIP CODE: 37067	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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CHECK PAYABLE TO THE	ABCC OR COM	IMONWEALTH OF M	A:		
(CHECK MUST DENOTE THE N	AME OF THE LICENS	SEE CORPORATION, LLC, F	PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRM	NATION NUMBE	ER:			
LICENSE NUMBER: C23	177				
LICENSE NAME: BLACK	DIAMOND SPIR	TS, LLC			
ADDRESS: 381 MALLOR	Y STATION RD	STE 211			
CITY: FRANKLIN			STATE: TN		
ZIP CODE: 37067	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE	-	\$200.00			

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IF USED, EPAY CONFIRI						
LICENSE NUMBER: C23316						
LICENSE NAME: BODE	GAS ALTO ALI	MZORA, SL				
ADDRESS: EL MARCHA	LILLO	LUCAR 0488	87			
CITY:			STATE:			
ZIP CODE:	COUNTRY:	SPAIN				
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
						
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPL	_	\$200.00				
LESS THAN 5000 CAS	E2					

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C9	215			
LICENSE NAME: BODE	GAS CASTANO			
ADDRESS: P.O.BOX 12	0 30510 YECLA			
CITY:		STATE: SPAIN		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	F USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C23							
LICENSE NAME: BODE	LICENSE NAME: BODEGAS JIMENEZ LANDE						
ADDRESS: 45930 TOLEI	00						
CITY:		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C9	656			
LICENSE NAME: BODE	GAS MARTIN CODAX			
ADDRESS: BURGANO,	91 VILARINO 36			
CITY: CAMBADOS		STATE: SPAIN		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRM	MATION NUMBER:						
LICENSE NUMBER: C23319							
LICENSE NAME: BODE	LICENSE NAME: BODEGAS MUSTIGUILLO						
ADDRESS: 46300 VALE	NCIA						
CITY:							
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPLI LESS THAN 5000 CASI							

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CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C24	1918						
LICENSE NAME: BODEC	LICENSE NAME: BODEGAS ONTANON						
ADDRESS: 26006 LOGR	ONO						
CITY: LA RIOJA		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C23	3603						
LICENSE NAME: BODEC	GAS PIRINEOS PIRINEOS, S.A						
ADDRESS: VILA FRANC	A DEL PENEDES						
CITY: BARCELONA		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
			<u> </u>				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
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CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2150			
LICENSE NAME: BODE	GAS RAFAEL PALACIOS			
ADDRESS: 22, A RUA, 3	32350			
CITY: ORENSE		STATE:		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI					
CHECK PAYABLE TO TH	E ABCC OR COM	IMONWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICEN	SEE CORPORATION, LLC, PAR	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBI	ER:			
LICENSE NUMBER: C24	4628				
LICENSE NAME: BODE	GAS RIOJANAS U	ISA CORP			
ADDRESS: 301 RTE 17 I	NORTH	9TH FLR			
CITY: RUTHERFORD			STATE: NJ		
ZIP CODE: 07070	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL		\$200.00			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEAL	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1769			
LICENSE NAME: BODE	GAS SIERRA SALINAS, S.L.			
ADDRESS: VILLENA 034	100 ALICANTE			
CITY: CHARLOTTE		STATE: NC		
ZIP CODE: 28204	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(M.G.L. c. 138 §18B)

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ECRT CODE: CERT						
CHECK PAYABLE TO TH	HECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:					
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRI						
LICENSE NUMBER: C22	2848					
LICENSE NAME: BODE	LICENSE NAME: BODEGAS VALDESIL, SL					
ADDRESS: 32348 GRUS	E					
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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ECRT CODE: CERT							
CHECK PAYABLE TO TH	HECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI							
LICENSE NUMBER: C24	1139						
LICENSE NAME: BODE	LICENSE NAME: BODEGAS Y VINDEDOS						
ADDRESS: 01300 ALAV	A						
CITY:		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTI	H OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C24	1720			
LICENSE NAME: BOOK	WALTER WINERY, LLC			
ADDRESS: 894 TULIP LA	ANE			
CITY: RICHLAND		STATE: WA		
ZIP CODE: 99352	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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ECRT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMO	NWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CO	RSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C22	2252				
LICENSE NAME: BUON	CRISTIANI WINE CO.,	LLC			
ADDRESS: 175 TOWER	RD				
CITY: NAPA		STATE: CA			
ZIP CODE: 94581	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	<u> </u>	OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS		.00			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	H OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: CO4	177			
LICENSE NAME: CANNO	ON WINES			
ADDRESS: 20580 8TH S	T. EAST			
CITY: VINEBURG		STATE: CA		
ZIP CODE: 95487	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3681			
LICENSE NAME: CAPRI	NATURA SRL			
ADDRESS: VIA LA PORI	L 9			
CITY: STAGNO		STATE:		
ZIP CODE: 57017	COUNTRY: ITALY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5130			
LICENSE NAME: CAROL	INA DISTILLERY, LLC			
ADDRESS: 126 MULBER	RRTY			
CITY: LENOIR		STATE: NC		
ZIP CODE: 28645	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1754			
LICENSE NAME: CAROL	INE ONE, INC			
ADDRESS: 359 SOUTH	SWING RD			
CITY: GREENSBORO		STATE: NC		
ZIP CODE: 27409	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	ION, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRE	MATION NUMBER:					
LICENSE NUMBER: C23	3744					
LICENSE NAME: CASA	ENSE NAME: CASA CASTILLO					
ADDRESS: JUMILLA 30520						
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE	CORPORATION, LLC, PARTNE	RSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	1635				
LICENSE NAME: CATAN	MARCA IMPORTS, L	LC			
ADDRESS: 220 A DOMI	NION DR				
CITY: MORRISVILLE		S	TATE: NC		
ZIP CODE: 27560	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>F</u>	<u>EE</u> <u>‡</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	00.00			

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ECRI CODE: CERI				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF	MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, LLC	C, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C23	3908			
LICENSE NAME: CAVES	DO FREIXO, SA			
ADDRESS: APARTADO	115 - RUA DO C			
CITY: SANGALHAS		STATE:		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH O	F MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, I	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: CO	063			
LICENSE NAME: CELLAI	RS INTERNATIONAL/ILNA SEL			
ADDRESS: ILSE HAAG V	VEINEX. BRAUN			
CITY: MOSEL		STATE: GERMANY		
ZIP CODE:	COUNTRY: GERMANY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECKI CODE: CEKI	RT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:				
(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRM	MATION NUMBER:					
LICENSE NUMBER: C22	CENSE NUMBER: C22574 CENSE NAME: CELLER MAS DOIX					
LICENSE NAME: CELLER						
ADDRESS: 43376 TARRAGONA						
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
_						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPLI						

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CALENDAR YEAR 2012

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CHECK PAYABLE TO TH	CK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRM	MATION NUMBER:							
LICENSE NUMBER: C92	14							
LICENSE NAME: CELLER	CENSE NAME: CELLERS CAPCANES							
ADDRESS: CARRER PAL	CASSALS 33 43776 C	CAPCANES						
CITY:		STATE: SPAIN						
ZIP CODE:	COUNTRY: SPAIN							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPLI	ANCE \$200.00							
LESS THAN 5000 CASI	•							

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(CHECK MUST DENOTE THE NA	AME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	IATION NUMBER:			
LICENSE NUMBER: C238	370			
LICENSE NAME: CHANN	ING DAUGHTERS WINERY, LLC			
ADDRESS: 1927 SCUTTLI	EHOLE ROAD			
CITY: BRIDGEHAMPTON		STATE: NY		
ZIP CODE: 11932	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	1604			
LICENSE NAME: CHATE	AU COURAC			
ADDRESS: CHATEAU CO	ORAC 30330			
CITY: TRESQUES		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATI	ION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C40	075			
LICENSE NAME: CHATE	AU DE FLAUGERGUES			
ADDRESS: 1744 AVE. A	LBERT EINSTEIN 34000			
CITY: MONTPELLIER		STATE: FRANCE		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	1603				
LICENSE NAME: CHATE	ENSE NAME: CHATEAU DE FONTENILLE				
ADDRESS: 33670 LA SAUVE MAJEURE					
CITY:		STATE:			
ZIP CODE:	COUNTRY: FRANCE				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS					

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRI	USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: CHATE						
ADDRESS: 32800 EAUZE						
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
L						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	1605		<u></u>	
LICENSE NAME: CHATE	AU LES HAUTS D'AGLAN			
ADDRESS: AGLAN 4670	00 SOTURAC			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

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ECKI CODE: CEKI	RT CODE: CERT					
CHECK PAYABLE TO TH	ECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:					
(CHECK MUST DENOTE THE N	K NUMBER:					
CHECK NUMBER:						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C92	ICENSE NUMBER: C9220					
LICENSE NAME: CHATE						
ADDRESS: 84570 NORM	MOIRAN					
CITY:		STATE: FRANCE				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, L	LC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	4569			
LICENSE NAME: CHATE	AU PUECH HAUT			
ADDRESS: 2250 ROUTE	E DE			
CITY: ST. DREZERY		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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ECRI CODE: CERI						
CHECK PAYABLE TO TH	IECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:					
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION					
CHECK NUMBER:						
IF USED, EPAY CONFIR	MATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: CHATE						
ADDRESS: MONBAZZILA						
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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ECRT CODE: CERT				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3364			
LICENSE NAME: CHEVA	AL QUANCARD			
ADDRESS: 33565 CARB	ON-BLANC			
CITY: CEDEX		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI					
CHECK PAYABLE TO TH	IE ABCC OR COMM	ONWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENSE	E CORPORATION, LLC, PART	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER	::			
LICENSE NUMBER: C2	4304				
LICENSE NAME: CIMA	COLINA WINERY, I	LLC			
ADDRESS: 3344 PAUL I	DAVIS DR	#6			
CITY: MARINA			STATE: CA		
ZIP CODE: 93933	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	•	200.00			

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEA	TH OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	4433			
LICENSE NAME: CLARE	NCE DILLON WINES S.A.S			
ADDRESS: 53 RUE DU I	DEHEZ 33290 B	LANQUEFORT		
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECKI CODE: CEKI	RT CODE: CERT					
CHECK PAYABLE TO TH	ECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:					
(CHECK MUST DENOTE THE N	ECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:						
IF USED, EPAY CONFIRM	MATION NUMBER:					
LICENSE NUMBER: C23820 LICENSE NAME: CLOS CHANTE DUC						
ADDRESS: GIRONDAS 8	4190					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
_						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPLI						

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI							
CHECK PAYABLE TO TH	HECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO						
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C23708 LICENSE NAME: CLOS I TERRAOS						
LICENSE NUMBER: C23							
LICENSE NAME: CLOS I							
ADDRESS: 43737							
CITY: TARRAGONA		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	4 571			
LICENSE NAME: CLOS S	ST JEAN			
ADDRESS: CHATEAUNE	UF D PAPE			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CALENDAR YEAR 2012

ECRT CODE: CERT	RT CODE: CERT					
CHECK PAYABLE TO TH	CK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:					
(CHECK MUST DENOTE THE	CK NUMBER:					
CHECK NUMBER:						
IF USED, EPAY CONFIR	MATION NUMBER:					
LICENSE NUMBER: C90	ICENSE NUMBER: C9653 ICENSE NAME: CONRERIA D'SCALA DEI					
LICENSE NAME: CONRI						
ADDRESS: MITJA GALT	A, 32 SCAL DEI 4					
CITY:		STATE: SPAIN				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL						
LESS THAN 5000 CAS	ES					

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ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	H OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C10	0001			
LICENSE NAME: COOPI	ERATIVA VINICOLA AURORA			
ADDRESS: BENTO GON	ICALVES			
CITY: GRANDE DO SUL		STATE: BRAZIL		
ZIP CODE:	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	212			
LICENSE NAME: CORNE	RSTON WINE DIST., LLC			
ADDRESS: 3121 OLD FR	AM LANE			
CITY: COMMERCE TWP		STATE: MI		
ZIP CODE: 48390	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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ECRI CODE: CERI				
CHECK PAYABLE TO TH	HE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4182			
LICENSE NAME: CORU	S, LLC			
ADDRESS: 63 FLUSHIN	G AVE BLDG. 77, U	NIT 333		
CITY: BROOKLYN		STATE: NY		
ZIP CODE: 11205	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CALENDAR YEAR 2012

ECRT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMO	NWEALTH OF MA:			
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE (CORPORATION, LLC, PARTNE	RSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER:				
LICENSE NUMBER: C99	945				
LICENSE NAME: CROCK	KER & STARR WINE,	со			
ADDRESS: 175 TOWER	ROAD				
CITY: NAPA		ST	TATE: CA		
ZIP CODE: 94503	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>F</u>	<u> </u>	OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	0.00			

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CALENDAR YEAR 2012

ECRI CODE: CERI				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF MA	A:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC, P.	ARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C23	3793			
LICENSE NAME: D'ALFO	ONSO CURRAN WINE GROUP			
ADDRESS: 1557 MISSIC	ON DR			
CITY: SOL VANG		STATE: CA		
ZIP CODE: 93463	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5033			
LICENSE NAME: D.F.J.	VINHOS, S.A.			
ADDRESS: VILA CHA D	E			
CITY: QURIQUE		STATE:		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

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ECRI CODE: CERI					
CHECK PAYABLE TO TH	E ABCC OR CO	OMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LIC	ENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUA	L)	
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUM	1BER:			
LICENSE NUMBER: C24	4921				
LICENSE NAME: DAO S	UL - SOCIEDA	DE VITIVINICO			
ADDRESS: QUINTA DAS	S SARZEDAS	CARREGAL	DO SAL		
CITY:			STATE:		
ZIP CODE:	COUNTRY:	PORTUGAL			
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	_	\$200.00			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C32	207			
LICENSE NAME: DESCH	UTES BREWERY INC			
ADDRESS: 901 SW SIM	PSON AVE			
CITY: BEND		STATE: OR		
ZIP CODE: 97702	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CALENDAR YEAR 2012

ECRT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMONW	/EALTH OF MA:			
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORP	ORATION, LLC, PARTNEF	SHIP OR INDIVIDUA	AL)	
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER:				
LICENSE NUMBER: C25	5193				
LICENSE NAME: DEVO	ENTERPRISES, CORP				
ADDRESS: 405 CARDED	EAN DRIVE				
CITY: HORSHAM		ST	ATE: PA		
ZIP CODE: 19044	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	<u>#</u>	OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI					

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	1584			
LICENSE NAME: DEVOT	TION SPIRITS, INC			
ADDRESS: 650 LENFEST	RD			
CITY: SAN JOSE		STATE: CA		
ZIP CODE: 95133	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C24	1627			
LICENSE NAME: DIAB II	MPORTERS,			
ADDRESS: 3351 E. PHIL	ADEPHIA STREE			
CITY: ONTARIO		STATE: CA		
ZIP CODE: 91761	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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CHECK PAYABLE TO TH	E ABCC OR COM	MONWEALTH OF MA:			
(CHECK MUST DENOTE THE N	NAME OF THE LICENS	EE CORPORATION, LLC, PAR	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBE	R:			
LICENSE NUMBER: C24	1509				
LICENSE NAME: DIAMO	OND KNOT BREW	ING, CO			
ADDRESS: 4602 CHENN	IAUK BEACH RD				
CITY: MUKILTEO			STATE: LA		
ZIP CODE: 98275	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	\$200.00			

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ECRT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMONWEA	LTH OF MA:			
(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:					
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:				
LICENSE NUMBER: C24	SE NUMBER: C24710 SE NAME: DJD SALES & MARKETING				
LICENSE NAME: DJD SA					
ADDRESS: 205 CONCOL					
CITY: SANTA ROSA		STATE: CA			
ZIP CODE: 95403	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS					

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATI	ION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5233			
LICENSE NAME: DNA V	INEYARDS			
ADDRESS: 6500 ROBIN	SON CREEK RD			
CITY: UKIA		STATE: CA		
ZIP CODE: 95482	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1609			
LICENSE NAME: DOMA	INE COLLIN			
ADDRESS: 11300 TOUR	REILLES			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEA	LTH OF MA:		
(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C92	240			
LICENSE NAME: DOMA	INE DE L'MORTAS			
ADDRESS: 34270 VALFA	AUNES			
CITY:		STATE: FRANCE		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				
LESS THAN 5000 CAS	ES			

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPOR	RATION, LLC, PARTNERSHIP OR INDIVIDUAL)	
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C23	3361			
LICENSE NAME: DOMA	INE DE LA CITADELLE			
ADDRESS: 84560 MENI	ERBES			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				
LESS THAN 5000 CAS	ES .			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1557			
LICENSE NAME: DOMA	INE DE LA LJANASSE EARL			
ADDRESS: 27 CHEMIN	DU MOULING			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPLI LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C23	3788			
LICENSE NAME: DOMA	INE DE MARCOUX			
ADDRESS: BP 31 CLATE	AUSEIF DE PAPE 84230			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				
LESS THAN 5000 CAS	ES	·		

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	1 593			
LICENSE NAME: DOMA	INE DE NALYS			
ADDRESS: 84231 CHAT	EAUNEF			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
			<u> </u>	
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF M	A:		
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:				
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:			
LICENSE NUMBER: C23	3360			
LICENSE NAME: DOMA	AINE DES GRANDES MAISON			
ADDRESS: LA RAME 33	S: LA RAME 33410, SAINTE CR			
CITY: DU MONT		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	,			

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MATION NUMBER:			
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INE DU CLOS D'ALRI			
NIN DU VAR			
	STATE:		
COUNTRY: FRANCE			
<u>FEE</u>	# OF PERMITS	<u>COST</u>	
	MATION NUMBER: 6611 INE DU CLOS D'ALRI NIN DU VAR COUNTRY: FRANCE	INE DU CLOS D'ALRI ININ DU VAR STATE: COUNTRY: FRANCE	MATION NUMBER: MINE DU CLOS D'ALRI NIN DU VAR STATE: COUNTRY: FRANCE

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1806			
LICENSE NAME: DOMA	LICENSE NAME: DOMAINE GIACHINO			
ADDRESS: CHEMIN DU	ADDRESS: CHEMIN DU MIMORAY			
CITY: LA PALUD		STATE: FRANCE		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C23	8822			
LICENSE NAME: DOMA	INE GIRAUD			
ADDRESS: CHATEAUNE	Y DU 84230			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
-				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRM	USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C23							
LICENSE NAME: DOMAI	LICENSE NAME: DOMAINE JAUME						
ADDRESS: 24 RUE REYN	ARDE 26110 VINSO	OBRES					
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>				
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(CHECK MUST DENOTE THE N						
CHECK NUMBER:						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C24	1607					
LICENSE NAME: DOMA	LICENSE NAME: DOMAINE LA BOUVAUDE					
ADDRESS: 26770 ROUS	SET LES GIGNES					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2740			
LICENSE NAME: DOMA	INE LA GARRIQUE EARL			
ADDRESS: VACQUEYCA	AS 84190			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	HECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRM	MATION NUMBER:						
LICENSE NUMBER: C22							
LICENSE NAME: DOMA	LICENSE NAME: DOMAINE ROGER CHAMPAULT						
ADDRESS: CHAMPTON	1830						
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
_							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPLI							

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CHECK PAYABLE TO TH						
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: DOMA	LICENSE NAME: DOMAINE ROLET					
ADDRESS: 39600 ARBO	IS					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIR	USED, EPAY CONFIRMATION NUMBER:				
LICENSE NUMBER: C24	4599				
LICENSE NAME: DOMA	INES LAPALU				
ADDRESS: 1 RUE DU 19)				
CITY:		STATE:			
ZIP CODE:	COUNTRY: FRANCE				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	# OF PERMITS	COST		
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(CHECK MUST DENOTE THE N						
CHECK NUMBER:						
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: DOMA	LICENSE NAME: DOMAINES RAIMBAULT PINEAU					
ADDRESS: 18300 SURY	EN VAUX					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
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(CHECK MUST DENOTE THE I							
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24594 LICENSE NAME: DOMAINES RENE CACHEUX						
LICENSE NUMBER: C24							
LICENSE NAME: DOMA							
ADDRESS: 28 RUE DE L	A GRENADE VEL 21700						
CITY: VOSNE		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK NUMBER:								
IF USED, EPAY CONFIRI	MATION NUMBER:							
LICENSE NUMBER: C24	1859							
LICENSE NAME: DOUBI	LE DIAMOND DIST., LLC							
ADDRESS: 1925 AIRPO	RT RD							
CITY: BRECKENRIDGE		STATE: CO						
ZIP CODE: 80424	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C2	5134							
LICENSE NAME: DOUB	LE DRAGON IMPORT COMP							
ADDRESS: HACKENSAC	CK AVE, BLDG 78							
CITY: DALLAS		STATE: TX						
ZIP CODE: 75230	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE								
CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C2	5307							
LICENSE NAME: DOWE	ELL BEVERAGE, INC							
ADDRESS: 266 JERICH	TPKE STE	н						
CITY: FLORA PARK		STATE: N	Υ					
ZIP CODE: 11001	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PER	MITS COS	I				
CERTIFICATES OF COMPL		0						

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4926			
LICENSE NAME: DOYN	A, LTD			
ADDRESS: 458 WORTN	MAN AVE			
CITY: BROOKLYN		STATE: NY		
ZIP CODE: 11208	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4766			
LICENSE NAME: DRINK	S AMERICAS			
ADDRESS: 1 PASSAN D	PRIVE			
CITY: WILKES BARRE		STATE: PA		
ZIP CODE: 18702	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24	4596					
LICENSE NAME: DUCM	AZE					
ADDRESS: 33760 TARG	ON					
CITY:	CITY: STATE:					
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	FEE	# OF PERMITS	COST			
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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C9050							
IF USED, EPAY CONFIRI								
LICENSE NUMBER: C90								
LICENSE NAME: DUNN	LICENSE NAME: DUNNING VINEYARDS							
ADDRESS: 1953 NIDERI	ER RD							
CITY: PASO ROBLES		STATE: CA						
ZIP CODE: 93446	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C23223						
LICENSE NUMBER: C23							
LICENSE NAME: E.A.R.I	DOMAINE DE ROME HER	VE					
ADDRESS: SANCERRIOS	S CHER						
CITY:		STATE:					
ZIP CODE: 18240	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
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CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C2	4651							
LICENSE NAME: EAGLE	EYE IMPORTS - IL., LLC							
ADDRESS: 1600 S ASHI	LAND AVE							
CITY: CHICAGO		STATE: IL						
ZIP CODE: 60608	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
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(CHECK MUST DENOTE THE								
CHECK NUMBER:	CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C9245 LICENSE NAME: EARL AIME SABON, DOMAINE DE							
LICENSE NUMBER: C9								
LICENSE NAME: EARL								
ADDRESS: 84350 CAUF	RTHEGAN							
CITY:		STATE: FRANCE						
ZIP CODE:	COUNTRY: FRANCE							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
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CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C9449							
LICENSE NUMBER: C94								
LICENSE NAME: EARL F	ROGER SABON							
ADDRESS: BP 57 B4232	2 CHATEAUME	UF DU PAGE						
CITY: CEDEX		STATE: FRANCE						
ZIP CODE:	COUNTRY: FRANCE							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, LI	.C, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24600 LICENSE NAME: EDMOND BRIOTTET							
LICENSE NUMBER: C24								
LICENSE NAME: EDMO								
ADDRESS: 12 RUE BERI	LIER 21005							
CITY: DIJON	STATE:							
ZIP CODE:	COUNTRY: FRANCE							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRM							
LICENSE NUMBER: C24							
LICENSE NAME: ELIO A	LICENSE NAME: ELIO ALTARE						
ADDRESS: 12064 LA MO	ADDRESS: 12064 LA MORRA - CUNEO						
CITY:							
ZIP CODE:	COUNTRY: ITALY						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
_							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPLI							

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3207			
LICENSE NAME: ELLE-T	T S.R.I.			
ADDRESS: VIA SOPERG	iA, 20			
CITY: MILANO		STATE:		
ZIP CODE:	COUNTRY: ITALY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE							
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C32	272						
LICENSE NAME: ENOTE	CA INTERNATIONAL DE	RUAM					
ADDRESS: VIA DEL CAN	/IPOFIORE 112						
CITY: FIRENZE		STATE: ITALY					
ZIP CODE:	COUNTRY: ITALY						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF P	<u>ERMITS</u>	<u>COST</u>			
CERTIFICATES OF COMPL							
LESS THAN 5000 CAS	t5						

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(CHECK MUST DENOTE THE NAM	E OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRMA	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C2481	3							
LICENSE NAME: ENRIQUE	RAMOS							
ADDRESS: 3118W THOMA	S RD #721							
CITY: PHOENIX		STATE: AZ						
ZIP CODE: 85017 C	OUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00							

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ECRI CODE: CERI						
CHECK PAYABLE TO TH						
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:	CHECK NUMBER:					
IF USED, EPAY CONFIR						
LICENSE NUMBER: C24	LICENSE NUMBER: C24487 LICENSE NAME: ERAL BRAVO SA					
LICENSE NAME: ERAL E						
ADDRESS: MENDOZA,	ZC5500					
CITY:		STATE:				
ZIP CODE:	COUNTRY: ARGENTINA					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C2	4548				
LICENSE NAME: ESCOS	SUR GROUP, LLC				
ADDRESS: 124 CIRCLE	DRIVE				
CITY: SALISBURY	CITY: SALISBURY STATE: NC				
ZIP CODE: 24817	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	# OF PERMITS	COST		
CERTIFICATES OF COMPL					

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(CHECK MUST DENOTE THE	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C22151							
IF USED, EPAY CONFIR								
LICENSE NUMBER: C2								
LICENSE NAME: ESPEL	Γ VITICULTORS, S.L.							
ADDRESS: VILAJUIGA 1	.7493							
CITY:		STATE: SPAIN						
ZIP CODE:	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:	CHECK NUMBER:				
IF USED, EPAY CONFIRM	ATION NUMBER:				
LICENSE NUMBER: C247					
LICENSE NAME: EURL ROMAIN ROCHE					
ADDRESS: CAIRANNE 84	290				
CITY:		STATE:			
ZIP CODE:	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>		
CERTIFICATES OF COMPLIA					

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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:							
						LICENSE NUMBER: C26	5433
LICENSE NAME: EURL F	ROMAIN ROCHE						
ADDRESS: QUARTIER L	ES BOUCHEIRES CAIRANNE 8	4290					
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	1295						
LICENSE NAME: EUROF	PEAN WINE IMPORTS, INC						
ADDRESS: 4300 LAKESI	DE AVE						
CITY: CLEVELAND		STATE: OH					
ZIP CODE: 44114	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4476			
LICENSE NAME: EXPO	GROUP, S.A.			
ADDRESS: CHILECITO				
CITY: LA RIOJA		STATE:		
ZIP CODE:	COUNTRY: ARGENTINA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE								
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C5023 LICENSE NAME: EZEQUIEL MOREIRA SILVA & FILHO							
LICENSE NUMBER: C5								
LICENSE NAME: EZEQU								
ADDRESS: RUA DOS CO	ONDES 12 9600 RIBEIR	RA GRANDE						
CITY: S. MIGUEL-ACOF	RES	STATE: PORTUGAL						
ZIP CODE:	COUNTRY: PORTUGAL							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPI								

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ECRT CODE: CERT				
CHECK PAYABLE TO TH				
(CHECK MUST DENOTE THE N				
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C40	088			
LICENSE NAME: FABRIC	CA DE LICORES - EDUARDO			
ADDRESS: 9600 RIVEIR	A GRANDE			
CITY: AZORES		STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI				

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CHECK NUMBER:					
IF USED, EPAY CONFIR					
LICENSE NUMBER: C24					
LICENSE NAME: FAMIL	LICENSE NAME: FAMILIA NIN ORTIZ S.L.				
ADDRESS: 43730 TARR	ADDRESS: 43730 TARRAGONA				
CITY:		STATE:			
ZIP CODE:	COUNTRY: SPAIN				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPL					

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C90	019						
LICENSE NAME: FANTIS	S IMPORTS, INC.						
ADDRESS: 60 TRIANGE	L BLVD						
CITY: CARLSTADT	CITY: CARLSTADT STATE: NJ						
ZIP CODE: 07072	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N								
CHECK NUMBER:								
IF USED, EPAY CONFIRE	MATION NUMBER:		-					
LICENSE NUMBER: C25	5107							
LICENSE NAME: FAROP	IAN WINE CORPORATION	ON						
ADDRESS: 98 KEAN STR	REET							
CITY: WEST BABYLON		STATE:	NY					
ZIP CODE: 11704	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	<u># OF PE</u>	<u>RMITS</u>	COST				
CERTIFICATES OF COMPLI LESS THAN 5000 CASI								

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24500 LICENSE NAME: FEDWAY ASSOCIATES, INC			
LICENSE NUMBER: C2	4500			
LICENSE NAME: FEDW	AY ASSOCIATES, INC			
ADDRESS: 205 CAMPU	JS DRIVE			
CITY: KEARNY		STATE: NJ		
ZIP CODE: 07032	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL	,			

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSE	EE CORPORATION, LLC, F	PARTNERSHIP OR INDIVIDUAL	.)	
CHECK NUMBER:					
IF USED, EPAY CONFIRI	USED, EPAY CONFIRMATION NUMBER:				
LICENSE NUMBER: C23	3523				
LICENSE NAME: FICKLIN VINEYARDS					
ADDRESS: 20580 8TH STREET					
CITY: SONOMA			STATE: CA		
ZIP CODE: 95476	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	200.00			

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2739			
LICENSE NAME: FINCA	VILLACRECES, SL			
ADDRESS: VALLADOLIE	0 01307			
CITY:		STATE:		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	4756			
LICENSE NAME: FIRST	WORLD IMPORTS, INC			
ADDRESS: 4100 N. POV	WERLINE ROAD			
CITY: POMPANO BEAC	Н	STATE: FL		
ZIP CODE: 33073	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

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CHECK NUMBER:								
IF USED, EPAY CONFIRM	MATION NUMBER:							
LICENSE NUMBER: C24	1841							
LICENSE NAME: FISH BI	REWING, CO							
ADDRESS: 515 JEFFERS	ON STREET SE							
CITY: OLYMPIA		STATE: WA						
ZIP CODE: 98501	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLI LESS THAN 5000 CASI								

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5173			
LICENSE NAME: FLYING	G B VINEYARD, LP			
ADDRESS: 2900 MELRO	OSE AVE			
CITY: WALLA WALLA		STATE: WA		
ZIP CODE: 99362	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N				
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	4779			
LICENSE NAME: FONTA	ANELLA WINES, LLC			
ADDRESS: 50 TECHNOL	.OGY WAY			
CITY: NAPA		STATE: CA		
ZIP CODE: 95405	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•			

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CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	4541				
LICENSE NAME: FORM	AN VINEYARD				
ADDRESS: 377 MCCOR	ADDRESS: 377 MCCORMICK STREET				
CITY: ST. HELENA		STATE: CA			
ZIP CODE: 94574	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS					

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(CHECK MUST DENOTE THE NAM	IE OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMA	TION NUMBER:			
LICENSE NUMBER: C2456	4			
LICENSE NAME: FRANCIS	COPPOLA WINERY, LLC			
ADDRESS: 875 HANNA DR	RIVE			
CITY: AMERICAN CANYON	I	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00			

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMATION NUMBER:				
LICENSE NUMBER: C24	ICENSE NUMBER: C24474			
LICENSE NAME: FRANC	LICENSE NAME: FRANCOLI USA			
ADDRESS: 20 28074 GHEMME				
CITY:		STATE:		
ZIP CODE:	COUNTRY: ITALY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
_				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPLI				

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ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4764			
LICENSE NAME: FRANK	KLIN'S GENERAL STORE			
ADDRESS: 5121 BALTII	MORE AVE			
CITY: HYATTSVILLE		STATE: MD		
ZIP CODE: 20781	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3505			
LICENSE NAME: FRANZ	REH & SOHN, LLC			
ADDRESS: 35, BINGEN	/ RHEIN, 5541			
CITY:		STATE:		
ZIP CODE:	COUNTRY: GERMANY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION,	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	1032			
LICENSE NAME: FREDE	RICK WILDMAN & SONS, LTD			
ADDRESS:				
CITY: SAN ANTONIO		STATE: CHILE		
ZIP CODE:	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF	MA:					
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C2	LICENSE NUMBER: C22898						
LICENSE NAME: FRIAS	FAMILY VINEYARD						
ADDRESS: 660 -A AIRP	ARK RD						
CITY: NAPA		STATE: CA					
ZIP CODE: 94558	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL							

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	H OF MA:				
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:						
IF USED, EPAY CONFIR	MATION NUMBER:					
LICENSE NUMBER: C22	2623					
LICENSE NAME: G. D. V	/AJRA					
ADDRESS: 25 VIA DELL	E VIOLE					
CITY: BAROLO	STATE:					
ZIP CODE: 12060	COUNTRY: ITALY					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	2049			
LICENSE NAME: GLOBA	AL WINES, LLC			
ADDRESS: 1340 STIRLI	NG RD #63			
CITY: DANIA BEACH		STATE: FL		
ZIP CODE: 33004	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	ATION NUMBER:			
LICENSE NUMBER: C961	0			
LICENSE NAME: GOLDEN	BEAR VINEYARDS			
ADDRESS: 2115 S. BLOSS	ER RD #121			
CITY: SANTA MARIA		STATE: CA		
ZIP CODE: 93458	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAI LESS THAN 5000 CASES				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEAL	LTH OF MA:						
(CHECK MUST DENOTE THE	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C9	581							
LICENSE NAME: GOLDS	SCHMIDT VINEYARDS LLC							
ADDRESS: 20580 8TH S	ST EAST							
CITY: SONOMA		STATE: CA						
ZIP CODE: 95476	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CALENDAR YEAR 2012

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH OF	MA:				
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC	, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24	1496					
LICENSE NAME: GORD	ASH BREWING, CO					
ADDRESS: 2054 PIEDM	ONT HWY					
CITY: GREENVILLE		STATE: SC				
ZIP CODE: 29605	COUNTRY:					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: GOUSSELAND PERE & FILS						
ADDRESS: 17120 CHEN	AC ST. SEURIN					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
_						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH C	F MA:				
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C9269						
						LICENSE NAME: GRAM
ADDRESS: 36 APARIAT	DE CORREAS 90 08770 ST.	SADONI D'AMOIA				
CITY:		STATE: SPAIN				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL						

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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	1466							
LICENSE NAME: GRANI	D E. SPIRITUS, INC							
ADDRESS: 16542 AIR C	ENTER BLVD							
CITY: HOUSTON		STATE: TX						
ZIP CODE: 77032	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO TH	E ABCC OR COMMONV	WEALTH OF MA:						
(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRE	MATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24641							
LICENSE NAME: GREEN	BAY BREWING, CO., IN	NC						
ADDRESS: 313 DOUSM	AN STREET							
CITY: GREEN BAY		S	ΓΑΤΕ: WI					
ZIP CODE: 54313	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	<u>#</u>	OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS)						

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CHECK PAYABLE TO TH	E ABCC OR COMMON	WEALTH OF MA:				
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE COR	PORATION, LLC, PARTNE	RSHIP OR INDIVIDUA	L)		
CHECK NUMBER:						
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24	1716					
LICENSE NAME: GREEN	I MOUNTAIN ARTISAN	AL				
ADDRESS: 601 OLD RIV	ER RD					
CITY: JUNCTION		S	TATE: VT			
ZIP CODE: 05001	COUNTRY:					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	FEE	<u>#</u>	OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS		0				

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E ABCC OR COMMONWEALTH	OF MA:					
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
IF USED, EPAY CONFIRMATION NUMBER:						
313						
ETZION WINERY						
EFRAT, 90435						
	STATE:					
COUNTRY: ISRAEL						
<u>FEE</u>	# OF PERMITS	<u>COST</u>				
ANCE \$200.00						
	MATION NUMBER: 1313 ETZION WINERY EFRAT, 90435 COUNTRY: ISRAEL	MATION NUMBER: 1313 ETZION WINERY EFRAT, 90435 STATE: COUNTRY: ISRAEL FEE # OF PERMITS	MATION NUMBER: B313 ETZION WINERY EFRAT, 90435 STATE: COUNTRY: ISRAEL FEE # OF PERMITS COST			

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CHECK PAYABLE TO THE	E ABCC OR COM	IMONWEALTH O	FMA:		
(CHECK MUST DENOTE THE N	IAME OF THE LICEN	SEE CORPORATION, LI	LC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRM	MATION NUMB	ER:			
LICENSE NUMBER: C24	1244				
LICENSE NAME: HARRIS	S ESCHER VINEY	ARDS, LLC			
ADDRESS: 644 HANNA	DRIVE				
CITY: AMERICAN CANY	ON		STATE: CA		
ZIP CODE:	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE		\$200.00			

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	707			
LICENSE NAME: HART	WELL VINEYARDS			
ADDRESS: 5795 SILVER	ADO TRAIL			
CITY: NAPA, ST. HELEN	Α	STATE: CA		
ZIP CODE: 94558	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4708			
LICENSE NAME: HENDI	RY PREMIUM IMPORTS, INC			
ADDRESS: 630 MARGA	T ROAD			
CITY: LINCOLNSHIRE		STATE: IL		
ZIP CODE: 60069	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C98	835			
LICENSE NAME: HERDA	ADE PERDIGAO-EXP AGRICOL			
ADDRESS: APARTADO	29-7450 - 999			
CITY: ALENTEJO		STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSE	E CORPORATION, LLC, PART	NERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER	R :			
LICENSE NUMBER: C2	4194				
LICENSE NAME: HIGH	SPIRITS IMPORTIN	G, INC			
ADDRESS: 1040 NATIO	NAL AVE	UNIT D			
CITY: ADDISION			STATE: IL		
ZIP CODE: 60101	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	•	200.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	4193			
LICENSE NAME: HOME	TEAM WINES, LLC			
ADDRESS: 205 JIM OSV	WALT WAY STE A			
CITY: AMERICAN CANY	ON .	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	,			

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1695			
LICENSE NAME: HOWA	RD S. LEIGHT			
ADDRESS: 400 DEL NO	RTE BLVD			
CITY: OXNARD		STATE: CA		
ZIP CODE: 93030	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE NA	AME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	IATION NUMBER:			
LICENSE NUMBER: C251	164			
LICENSE NAME: HUGH S	ISSON			
ADDRESS: 4615 HOLLINS	S FERRY RD STE B			
CITY: BALTIMORE		STATE: MD		
ZIP CODE: 21227	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE:				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATI	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C01	125			
LICENSE NAME: IDUSTF	RIAS DE BEBIDAS CRISTIN.			
ADDRESS: PO BOX 43-8	3501			
CITY: PORTIMAO CODE	×	STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C20	0081			
LICENSE NAME: INDUS	TRIA COMERCIO E EXPORT	ACO .		
ADDRESS: ST. CLAIR BE	RITO 157			
CITY: SALNAS MINAS		STATE: BRAZIL		
ZIP CODE:	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICEN	ISEE CORPORATION, L	LC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMB	ER:			
LICENSE NUMBER: C2:	1027				
LICENSE NAME: INTERI	NATIONAL BEVE	ERAGE, CO.			
ADDRESS: 100 CENTRA	L AVE				
CITY: S. KEARNY			STATE: NJ		
ZIP CODE:	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	-	\$200.00			

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALT	H OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3989			
LICENSE NAME: J C IM	PORT, CO			
ADDRESS: 51 ABBOTT	STREET			
CITY: CUMBERLAND		STATE:		
ZIP CODE:	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	E ABCC OR COMMON	WEALTH OF MA:			
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE COR	PORATION, LLC, PARTNE	RSHIP OR INDIVIDUA	L)	
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	1447				
LICENSE NAME: J-NH V	VINE GROUP, LLC				
ADDRESS: 14710 WOO	DINVILLE REDM				
CITY: WOODINVILLE		S	ΓΑΤΕ: WA		
ZIP CODE: 98072	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	<u>#</u>	OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS		0			

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	NATION NUMBER:			
LICENSE NUMBER: C10	26			
LICENSE NAME: JEAN B	ECKER SA			
ADDRESS: 4, ROUTE D'O	STHEIM			
CITY: 68340 ZELLENBER	G	STATE: FRANCE		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALT	ГН OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATI	ION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4598			
LICENSE NAME: JEAN-I	BAPTISTE AUDY			
ADDRESS: 35, QUAY D	E PIOURAT 3350			
CITY:		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1780			
LICENSE NAME: JIM TO	NJUM CELLARS, INC			
ADDRESS: 205B JIM OS	SWALD WAY			
CITY: AMERICAN CANY	ON	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALT	H OF MA:		
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C90	31			
LICENSE NAME: JOAO T	. BARBOSA - VINHOS, LDA			
ADDRESS: APARTADO 4	RUA DR. FRANC	CISCO BARBOSA 17		
CITY: 17, RIO MAIOR		STATE: PORTUGAL		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH O	F MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, L	LC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4619			
LICENSE NAME: JOHN	CALLAGHAN			
ADDRESS: BEL ARBRES	S RD			
CITY: REDWOOD VALL	EY	STATE: CA		
ZIP CODE: 95470	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPO	RATION, LLC, PARTNERSHIP OR IN	IDIVIDUAL)	
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C23	3845			
LICENSE NAME: JOM W	/INE & SPIRITS, INC.			
ADDRESS: 1094 FRANC	ES STREET			
CITY: STREAMWOOD		STATE: IL		
ZIP CODE: 60107	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMI	TS COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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CHECK PAYABLE TO TH	E ABCC OR CO	MMONWEALTH	l OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICE	ENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDU	AL)	
CHECK NUMBER:					
IF USED, EPAY CONFIRM	MATION NUM	BER:			
LICENSE NUMBER: C22	2440				
LICENSE NAME: JOSEPH	H VICTORI WIN	IES, INC.			
ADDRESS: 790 NEW YO	RK AVENUE	STE 211			
CITY: HUNTINGTON			STATE: NY		
ZIP CODE: 11743	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI	_	\$200.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4772			
LICENSE NAME: KANTI	NA ARBERI			
ADDRESS: RESHEN				
CITY: MIRDITE		STATE:		
ZIP CODE:	COUNTRY: ALBANIA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATI	ION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C36	588			
LICENSE NAME: KARL L	AWRENCE CELLARS			
ADDRESS: 175 TOWER	RD			
CITY: NAPA		STATE: CA		
ZIP CODE: 94581	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH O	FMA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, L	LC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C23	3346			
LICENSE NAME: L. WAT	TSON INC.			
ADDRESS: 74 AVENUE	DE BLEGIQUE			
CITY: BP 145		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4623			
LICENSE NAME: LA BET	ΓΕ WINES, INC			
ADDRESS: 9200 NE AB	BEY RD			
CITY: LAFAYETTE		STATE: OR		
ZIP CODE: 97127	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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ECRT CODE: CERT				
CHECK PAYABLE TO TH				
(CHECK MUST DENOTE THE N				
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C22				
LICENSE NAME: LA COVA DELS VINS SCP				
ADDRESS: 43776 TARAGONA				
CITY:		STATE:		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
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ECRI CODE: CERI						
CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION					
CHECK NUMBER:						
IF USED, EPAY CONFIR						
LICENSE NUMBER: C24650						
LICENSE NAME: LABAT	LICENSE NAME: LABATT US OPERATING CO, LLC					
ADDRESS: 1 CARLINGV	IEW DR					
CITY: TORONTO, ON		STATE:				
ZIP CODE:	COUNTRY: CANADA					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	2485			
LICENSE NAME: LEGAC	Y IMPORTS, INC.			
ADDRESS: 2220 91ST S	TREET			
CITY: NEW HERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24602 LICENSE NAME: LES BORDEAUX MICHEL BOYER ADDRESS: 84 ROTE DE ST MACAIRE						
LICENSE NAME: LES BO							
ADDRESS: 84 ROTE DE							
CITY: LOUPIACE		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE							
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C9	LICENSE NUMBER: C9246 LICENSE NAME: LES VIGNERONS D'ESTEZARGUE						
LICENSE NAME: LES VI							
ADDRESS: 30390 ESTE	ZARGUE						
CITY:		STATE: FRANCE					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CHECK PAYABLE TO THE AB	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE NAME							
CHECK NUMBER:							
IF USED, EPAY CONFIRMAT	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24686	LICENSE NUMBER: C24686 LICENSE NAME: LION NATHAN USA, INC ADDRESS: 1275 COMMERCE BLVD						
LICENSE NAME: LION NATH							
ADDRESS: 1275 COMMERC							
CITY: AMERICAN CANYON		STATE: CA					
ZIP CODE: 94503 CC	OUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPLIANC LESS THAN 5000 CASES	£ \$200.00						

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CHECK PAYABLE TO THE AB	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE NAME							
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:						
IF USED, EPAY CONFIRMAT							
LICENSE NUMBER: C25082	LICENSE NUMBER: C25082 LICENSE NAME: LION NATHAN USA, INC.						
LICENSE NAME: LION NATH							
ADDRESS: 1275 COMMERC	ADDRESS: 1275 COMMERCE BLVD						
CITY: AMERICAN CANYON		STATE: CA					
ZIP CODE: 94503 CO	DUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPLIANC LESS THAN 5000 CASES	E \$200.00						

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(CHECK MUST DENOTE THE								
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C25178 LICENSE NAME: LIONS WINES NY, LLC							
IF USED, EPAY CONFIR								
LICENSE NUMBER: C2								
LICENSE NAME: LIONS								
ADDRESS: 401 BROAD	WAY STE 2213							
CITY: NEW YORK		STATE: NY						
ZIP CODE: 10013	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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(CHECK MUST DENOTE THE	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24048 LICENSE NAME: LOCATION ELEVATION & SLOPE, IN							
LICENSE NAME: LOCAT								
ADDRESS: 825 DEN BES	STE COURT							
CITY: WINDSOR		STATE: CA						
ZIP CODE: 95492	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL	,							

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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C22	LICENSE NUMBER: C22641						
LICENSE NAME: LONGE	LICENSE NAME: LONGBOARD VINEYARDS, LLC						
ADDRESS: 551 AVIATIO	ADDRESS: 551 AVIATION BLVD						
CITY: SANTA ROSA		STATE: CA					
ZIP CODE: 95403	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:							
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C23	LICENSE NUMBER: C23812						
LICENSE NAME: LOSAD	LICENSE NAME: LOSADA VINOS DE FINCA						
ADDRESS: 32348							
CITY: ORENSE		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	MATION NUMBER:						
LICENSE NUMBER: C2	LICENSE NUMBER: C25034						
LICENSE NAME: MADE	EIRA WINE CO., S.A.						
ADDRESS: FUNCHAI							
CITY: MADEIRA		STATE:					
ZIP CODE:	COUNTRY: PORTUGAL						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPI LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE I							
CHECK NUMBER:							
IF USED, EPAY CONFIR	F USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24868						
LICENSE NAME: MAGN	LICENSE NAME: MAGNUS, LLC						
ADDRESS: 1500 SREIL \	/ALLEY RD						
CITY: POPE VALLEY		STATE: CA					
ZIP CODE: 94567	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24308 LICENSE NAME: MANES INVESTMENTS, LLC						
LICENSE NAME: MANE							
ADDRESS: 74 SAND PA	RK RD						
CITY: CEDAR GROVE		STATE: NJ					
ZIP CODE: 07009	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24560							
LICENSE NAME: MARC	LICENSE NAME: MARC RIPOLL SANS ADDRESS: GRATALLOP, 43737 TARRAG						
ADDRESS: GRATALLOP							
CITY:		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24898						
LICENSE NAME: MARK	LICENSE NAME: MARK ANTHONY BRANDS, INC						
ADDRESS: 1920 ALBIOI	N ROAD						
CITY: TORONTO		STATE: ON					
ZIP CODE:	COUNTRY: CANADA						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE							
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C40	LICENSE NUMBER: C4080						
LICENSE NAME: MARK	LICENSE NAME: MARK ANTHONY BRANDS, INC						
ADDRESS: 110 BARLEY	PARK LN						
CITY: MOORESVILLE		STATE: NC					
ZIP CODE: 28031	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE								
CHECK NUMBER:	CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C10088 LICENSE NAME: MARK ANTHONY BRANDS, INC.							
LICENSE NUMBER: C1								
LICENSE NAME: MARK								
ADDRESS: 175 TOWER	ROAD							
CITY: NAPA		STATE: CA						
ZIP CODE: 94588	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO TH	E ABCC OR COMMONWE	ALTH OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPO	RATION, LLC, PARTNERSHIP OR INDIVIDUAL	-)	
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4913			
LICENSE NAME: MARK	RYAN WINERY, LLC			
ADDRESS: 19501 144T	H AVE STE F-	900		
CITY: WOODINVILLE		STATE: WA		
ZIP CODE: 98072	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
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CHECK NUMBER:							
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C22							
LICENSE NAME: MAS D EN COMPTE							
ADDRESS: 43739 TARRA							
CITY:		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
_							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
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CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C22	LICENSE NUMBER: C22149						
LICENSE NAME: MAS C	QUE VINOS ERCAVIO						
ADDRESS: 11 NOBLEJA	S 45350						
CITY: TOLEDO		STATE: SPAIN					
ZIP CODE:	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE I							
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24749 LICENSE NAME: MAYER BROS. APPLE PRODUCTS						
LICENSE NAME: MAYE							
ADDRESS: 7389 LAKE R	OAD						
CITY: BARKER		STATE: NY					
ZIP CODE: 14012	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>cost</u>				
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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24904 LICENSE NAME: MCFADDEN VINEYARD						
LICENSE NAME: MCFAI							
ADDRESS: 501 PARDUC	CCI RD						
CITY: UKIAH		STATE: CA					
ZIP CODE: 95482	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPLI LESS THAN 5000 CASI							

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	3713			
LICENSE NAME: MCNE	EILL'S LLC			
ADDRESS: 22 BROWNI	E COURT UNIT 102			
CITY: BRATTLEBORO		STATE: VT		
ZIP CODE: 05301	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CO	RPORATION, LLC, PARTNE	ERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER:				
LICENSE NUMBER: C92	237				
LICENSE NAME: MICHA	AEL ETZEL, ROB PARKI	ER, ROY			
ADDRESS: 15155 NORT	H VALLEY RD				
CITY: NEWBERG		S	TATE: OR		
ZIP CODE: 97132	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	. <u>#</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS		00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4173			
LICENSE NAME: MICHA	AEL FRANCIS COLLINS			
ADDRESS: 7970 CAME	RON DR			
CITY: WINDSOR		STATE: CA		
ZIP CODE: 95492	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICEN	SEE CORPORATION, LLC, P	ARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMB	ER:			
LICENSE NUMBER: C20	0011				
LICENSE NAME: MIDDI	E AGES BREWIN	IG CO., LTD.			
ADDRESS: 120 WILKINS	SON STREET				
CITY: SYRACUSE			STATE: NY		
ZIP CODE: 13204	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	-	\$200.00			

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CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C70	089			
LICENSE NAME: MILL C	REEK VINEYARDS			
ADDRESS: 825 DENBES	TE CT			
CITY: WINDSOR		STATE: CA		
ZIP CODE: 95492	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1638			
LICENSE NAME: MISST	ARR WINE IMPORTERS			
ADDRESS: 10 HILLDALE	COURT			
CITY: ORINDA		STATE: CA		
ZIP CODE: 94563	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1149			
LICENSE NAME: MONT	ANYA DISTILLERS			
ADDRESS: 1332 EMPIR	E STREET			
CITY: SILVERTON		STATE: CO		
ZIP CODE: 81433	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, LLC	C, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:	CHECK NUMBER:					
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24155 LICENSE NAME: MONTE LA REINA S.C.L., CORP					
LICENSE NUMBER: C24						
LICENSE NAME: MONT						
ADDRESS: 49881 TORC	ZAMORA					
CITY:	STATE:					
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL						

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CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C24	1696			
LICENSE NAME: MONT	ECASTELLI WINE, INC.			
ADDRESS: 636 BROAD	NAY			
CITY: NEW YORK		STATE: NJ		
ZIP CODE: 10012	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CO	IERSHIP OR INDIVIDUAL	.)				
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C22565 LICENSE NAME: MORIS FARMS SRL, FATTORIA							
ADDRESS: 58024 MASSA MARTTMA							
CITY:		STATE:					
ZIP CODE:	COUNTRY: ITALY						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	<u> </u>	# OF PERMITS	<u>COST</u>			
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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4893			
LICENSE NAME: MORN	IE WINE, CO			
ADDRESS: 2803 ORCH	ARD AVE			
CITY: MCMINNVILLE		STATE: OR		
ZIP CODE: 97128	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C22	2404			
LICENSE NAME: MOTH	ER LODE BREWERY, LLC			
ADDRESS: 1401 MINER	STREET			
CITY: IDAHO SPRINGS		STATE: CO		
ZIP CODE: 80452	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:							
IF USED, EPAY CONFIRMA	TION NUMBER:						
LICENSE NUMBER: C2479	ICENSE NUMBER: C24790						
LICENSE NAME: MT GLOBAL, LLC							
ADDRESS: 92 MAIN ROAD	, 7646						
CITY: CAPE		STATE:					
ZIP CODE:	OUNTRY: SOUTH AFRICA						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00						

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CHECK NUMBER:							
IF USED, EPAY CONFIRM	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24567 LICENSE NAME: MUTT LYNCH WINERY, INC						
LICENSE NAME: MUTT							
ADDRESS: 1010 SHILOH	I RD						
CITY: WINDSOR		STATE: CA					
ZIP CODE: 95492	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRI	F USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C22612								
LICENSE NAME: NATUR	LICENSE NAME: NATURAL MERCHANTS, LLC							
ADDRESS: CARTAGENA MURCIA 30201								
CITY:		STATE:						
ZIP CODE:	COUNTRY: SPAIN							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>					
CERTIFICATES OF COMPL								

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4572			
LICENSE NAME: NATU	RAL MERCHANTS, LLC			
ADDRESS: 1101 PRITCH	HARD RD			
CITY: JACKSONVILLE		STATE: FL		
ZIP CODE: 32219	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
(CHECK MUST DENOTE THE I							
CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24559						
LICENSE NAME: NEW L	LICENSE NAME: NEW LASTEC, S.L						
ADDRESS: SEVA 08553							
CITY: BARCELONA		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	MATION NUMBER:						
LICENSE NUMBER: C23	LICENSE NUMBER: C23987 LICENSE NAME: NEWELL VINEYARDS						
LICENSE NAME: NEWE							
ADDRESS: 6305 BUENA	A VISTA DR						
CITY: PASO ROBLES		STATE: CA					
ZIP CODE: 93446	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	ATION NUMBER:			
LICENSE NUMBER: C245	63			
LICENSE NAME: NIEBAU	M-COPPOLA ESTATE WINERY	,		
ADDRESS: 875 HANNA D	RIVE			
CITY: AMERICAN CANYO	N	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAI LESS THAN 5000 CASES				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24065 LICENSE NAME: NORETTA & ASSOC., INC						
LICENSE NAME: NORET							
ADDRESS: 551 AVIATIO	ADDRESS: 551 AVIATION BLVD						
CITY: SANTA ROSA		STATE: CA					
ZIP CODE: 95403	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	ION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C22	LICENSE NUMBER: C22845						
LICENSE NAME: NOUV	LICENSE NAME: NOUVEAU VENTURES, LLC						
ADDRESS: 78 SAW MIL	L POND RD						
CITY: EDISON		STATE: NJ					
ZIP CODE: 08817	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C25	LICENSE NUMBER: C25228 LICENSE NAME: NOVO MEXICAN SPIRITS, LLC						
LICENSE NAME: NOVO							
ADDRESS: 2526 MANA	NA RD						
CITY: DALLLAS		STATE: TX					
ZIP CODE: 75220	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24733 LICENSE NAME: OAKVILLE HILLS CELLARS, INC						
LICENSE NAME: OAKVI							
ADDRESS: 1150 DOWD	ELL LANE						
CITY: ST. HELENA		STATE: CA					
ZIP CODE: 94574	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CALENDAR YEAR 2012

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:	CHECK NUMBER:						
IF USED, EPAY CONFIR	MATION NUMBER:						
LICENSE NUMBER: C2	LICENSE NUMBER: C24874						
LICENSE NAME: OLD V	ORLD VINES, CORP						
ADDRESS: 4606 SANT	FE STREET						
CITY: SAN DIEGO		STATE: CA					
ZIP CODE: 92109	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	NATION NUMBER:			
LICENSE NUMBER: C24	717			
LICENSE NAME: OLSEN	AGRICULTURAL CO., INC			
ADDRESS: 2900 PRINGL	E RD #100			
CITY: SALEM		STATE: OR		
ZIP CODE: 97302	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA				

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(CHECK MUST DENOTE THE	NAME OF THE LICEN	ISEE CORPORATION, LLC, PAR	RTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMB	ER:			
LICENSE NUMBER: C2	5211				
LICENSE NAME: OLSON	OGDEN WINES	S, LLC			
ADDRESS: 830 DENBES	TE COURT	STE C			
CITY: SEBASTOPOL			STATE: CA		
ZIP CODE: 95472	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL	_	\$200.00			

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATI	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C99	959			
LICENSE NAME: OPOLO	VINEYARDS, INC.			
ADDRESS: 7110 VINEY	ARD DRIVE			
CITY: PASO ROBLES		STATE: CA		
ZIP CODE: 93446	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	2289			
LICENSE NAME: ORIEL,	LLC			
ADDRESS: 78 SAW MIL	L POND RD			
CITY: EDISON		STATE: 08817		
ZIP CODE: 08817	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPO	ORATION, LLC, PARTNERSHIP OR II	NDIVIDUAL)	
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	4729			
LICENSE NAME: ORIGII	NS EXCEL WINE & SPIRIT	S		
ADDRESS: 3405 N FRO	NT STREET			
CITY: HARRISBURG		STATE: PA		
ZIP CODE: 17110	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERM	<u>its</u> <u>cos</u> ī	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF I	MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC	, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2894			
LICENSE NAME: OSHAI	NGHNESSY WINERY			
ADDRESS: 175 TOWER	ROAD			
CITY: NAPA		STATE: CA		
ZIP CODE: 94581	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C24	4438			
LICENSE NAME: OSOCA	ALIS, INC			
ADDRESS: 5579 OLD SA	AN JOSE ROAD			
CITY: SOQUE		STATE: CA		
ZIP CODE: 95073	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSE	E CORPORATION, LLC, PARTN	IERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER	: :			
LICENSE NUMBER: C22	2047				
LICENSE NAME: OUTER	CAPE IMPORTS,	LTD			
ADDRESS: 21468 8TH S	TREET EAST				
CITY: VINEBURG		9	STATE: CA		
ZIP CODE: 95487	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	•	200.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5108			
LICENSE NAME: PALE F	HORSE IMPORTS, INC.			
ADDRESS: 29212 INWO	OOD ROAD			
CITY: SHINGLETOWN		STATE: CA		
ZIP CODE: 96088	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPOR	RATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C2	5111			
LICENSE NAME: PALM	BAY INTERNATIONAL, INC			
ADDRESS: 18 ROTE DE	ВУ			
CITY: BEGADAN		STATE:		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	903			
LICENSE NAME: PANIZ	ZI AZ AGR			
ADDRESS: LOCALITA	RACCIANO 3	34 53037		
CITY: SAN GIMIGNANO)	STATE: ITALY		
ZIP CODE: 53037	COUNTRY: ITALY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL				

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C23	3802			
LICENSE NAME: PASTE	RNAK WINE IMPORTS, LLC			
ADDRESS: VIA DIEVOLE	E, 6 53019 VIGLI (SI)			
CITY:		STATE:		
ZIP CODE:	COUNTRY: ITALY			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C23	3227			
LICENSE NAME: PATRIC	OGE CELLARS, LLC			
ADDRESS: 221 DEVLIN	ROAD			
CITY: NAPA		STATE: CA		
ZIP CODE: 94558	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CO	RPORATION, LLC, PARTN	ERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C24	4633				
LICENSE NAME: PAUL I	ROBERT JONES, LLC				
ADDRESS: 6308 BENJA	MIN RD ST	E 703			
CITY: TAMPA		S	TATE: FL		
ZIP CODE: 33634	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE		# OF PERMITS	COST	
CERTIFICATES OF COMPL		00			

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(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPO	RATION, LLC, PARTNERSHIP OR INDIVIDUAL	.)	
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C24	099			
LICENSE NAME: PAX MA	AHLE WINES, LLC			
ADDRESS: 6450 FIRST S	TREET UNIT I	DKL		
CITY: FORESTVILLE		STATE: CA		
ZIP CODE: 95436	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C2	4137							
LICENSE NAME: PAZO	DE SENORANS, SL							
ADDRESS: 36616								
CITY: PONTEVEDRA		STATE:						
ZIP CODE:	COUNTRY: SPAIN							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4455			
LICENSE NAME: PEARS	ON & PEARSON, LLC			
ADDRESS: 177 REED RO	OAD			
CITY: TEMPERANCE		STATE: MI		
ZIP CODE: 48182	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	H OF MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C80	014			
LICENSE NAME: PERNO	DD RICARD USA, LLC			
ADDRESS: 6925 SAN TO	OMAS RD			
CITY: ELKRIDGE		STATE: MD		
ZIP CODE: 21075	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO THE ABO	C OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAME O	OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMATION	ON NUMBER:			
LICENSE NUMBER: C24577				
LICENSE NAME: PETER HUW	ILER			
ADDRESS: 880 HANNA DRIV	E			
CITY: AMERICAN CANYON		STATE: CA		
ZIP CODE: 94503 COU	JNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIANCE LESS THAN 5000 CASES	\$200.00			

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ECRT CODE: CERT									
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTI	H OF MA:							
(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)								
CHECK NUMBER:									
IF USED, EPAY CONFIRE	MATION NUMBER:								
LICENSE NUMBER: C40	073								
LICENSE NAME: PIERRE	E MONTAGNAC SARL								
ADDRESS: 17, RUE SEG	ALIER 33000								
CITY: BORDEAUX		STATE: FRANCE							
ZIP CODE:	COUNTRY: FRANCE								
CONTACT NUMBER:									
CONTACT E-MAIL:									
WEBSITE:									
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST						
CERTIFICATES OF COMPL LESS THAN 5000 CAS									

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECKI CODE: CEKI				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF	MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LI	.C, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4866			
LICENSE NAME: PLACIO	O DA BREJOEIRA VITICUL			
ADDRESS: 4950-660 M	ONCAO			
CITY:		STATE:		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEA	LTH OF MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	1775			
LICENSE NAME: PRODI	GAL BREWING CO., LLC			
ADDRESS: 678 TOWN I	HOUSE RD			
CITY: EFFINGHAM		STATE: NH		
ZIP CODE: 03882	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C23815 LICENSE NAME: PRODUCCIONS A MODINO, SL							
							ID
	STATE:						
COUNTRY: SPAIN							
<u>FEE</u>	# OF PERMITS	<u>COST</u>					
ANCE \$200.00							
	AME OF THE LICENSEE CORPORATION, IATION NUMBER: B15 CCIONS A MODINO, SL ID COUNTRY: SPAIN	AME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INTERPORT OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) STATE: COUNTRY: SPAIN FEE # OF PERMITS	AME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL) INATION NUMBER: B15 CCIONS A MODINO, SL ID STATE: COUNTRY: SPAIN FEE # OF PERMITS COST				

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CHECK PAYABLE TO THE	ABCC OR COMM	IONWEALTH OF MA:			
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE	CORPORATION, LLC, PART	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRM	NATION NUMBER	:			
LICENSE NUMBER: C243	312				
LICENSE NAME: PUERTO	VIEJO WINES, LL	.c			
ADDRESS: 17 CABLE DRI	VE	STES 110-117			
CITY: KEARNY			STATE: NJ		
ZIP CODE: 07032	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	!	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE	•	00.00			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEAL	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C30	067			
LICENSE NAME: PUGSL	EY BREWING CO, LLC			
ADDRESS: 86 NEWBUR	Y ST			
CITY: PORTLAND		STATE: ME		
ZIP CODE: 04101	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONV	VEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORF	PORATION, LLC, PARTNE	RSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C2	3653				
LICENSE NAME: Q4X, L	LC				
ADDRESS: 3230 RIVERS	SIDE AVE STE	150			
CITY: PASO ROBLES		ST	ATE: CA		
ZIP CODE: 93446	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	#	OF PERMITS	COST	
CERTIFICATES OF COMPL	•)			

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ECRI CODE: CERI						
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH C	OF MA:				
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C2	5165					
LICENSE NAME: QUALI	TY BEVERAGES					
ADDRESS: 47315 VALL	ADOLID					
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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CHECK PAYABLE TO THE A	BCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAM	IE OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMA	TION NUMBER:			
LICENSE NUMBER: C2522	3			
LICENSE NAME: QUENCH,	LLC			
ADDRESS: 1515 ABBOT KE	NNEY BLVD			
CITY: HUNTINGTON BEAC	Н	STATE: CA		
ZIP CODE: 92649 C	OUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00			

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ECRT CODE: CERT								
CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)								
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C23	3040							
LICENSE NAME: QUINT	A DA PADRELA							
ADDRESS: 5120 - 082 T	ABUACO							
CITY:		STATE:						
ZIP CODE:	COUNTRY: PORTUAL							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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ECRI CODE: CERI						
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	H OF MA:				
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATIO	E OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24	4529					
LICENSE NAME: RAINE	R WINE, LLC					
ADDRESS: 9119 GRATO	ON ROAD					
CITY: GRATON		STATE: CA				
ZIP CODE: 95444	COUNTRY:					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL						

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ECRI CODE: CERI					
CHECK PAYABLE TO TH	IE ABCC OR CON	MONWEALTH OF MA	:		
(CHECK MUST DENOTE THE	NAME OF THE LICEN	ISEE CORPORATION, LLC, PAR	RTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMB	ER:			
LICENSE NUMBER: C2	2797				
LICENSE NAME: RDJ AI	RTISAN WINE CO	OMPANY, LLC			
ADDRESS: 5449 WILLIA	AMS ROAD	SUITE A			
CITY: FAIRFIELD			STATE: CA		
ZIP CODE: 94534	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL	_	\$200.00			

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORA	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C23	3481			
LICENSE NAME: REGEN	ICY WINE GROUP, LLC			
ADDRESS: 418 AVIATIO	ON BLVD			
CITY: SANTA ROSA		STATE: CA		
ZIP CODE: 95403	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1206			
LICENSE NAME: REVEL	RY VINTNERS, LLC			
ADDRESS: 720 C STREE	т			
CITY: WALLA WALLA		STATE: WA		
ZIP CODE: 99362	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COM	MONWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENS	EE CORPORATION, LLC, PART	NERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBE	R:			
LICENSE NUMBER: C2	5060				
LICENSE NAME: RICHA	RD LONGORIA W	INES			
ADDRESS: 1700 INDUS	TRIAL WAY	UNIT A			
CITY: LOMPOC			STATE: CA		
ZIP CODE: 93436	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	•	\$200.00			

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	4846			
LICENSE NAME: ROCK	ART BREWERY			
ADDRESS: 632 LA PORT	TE RD			
CITY: MERRISVILLE		STATE: VT		
ZIP CODE: 05661	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF	MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC	, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C20	0037			
LICENSE NAME: ROCK	ART BREWERY, LLC			
ADDRESS: 254 WILKING	O STREET			
CITY: MORRISVILLE		STATE: VT		
ZIP CODE: 05661	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	4699			
LICENSE NAME: ROSA	VINEYARDS, LLC			
ADDRESS: 4122 POWE	RLINE RD			
CITY: WALLA WALLA		STATE: WA		
ZIP CODE: 99362	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO THE ABO	C OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAME O	OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMATION	ON NUMBER:			
LICENSE NUMBER: C23393				
LICENSE NAME: ROWLAND	CELLARS			
ADDRESS: 205 JIM OSWALT	WAY			
CITY: AMERICAN CANYON		STATE: CA		
ZIP CODE: 94503 CO	JNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIANCE LESS THAN 5000 CASES	\$200.00			

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	ATION NUMBER:			
LICENSE NUMBER: C247	09			
LICENSE NAME: RUCKUS	BREWING CO, LLC			
ADDRESS: 700 N PENNSL	YVANIA AVE			
CITY: WILKMES-BARRE		STATE: PA		
ZIP CODE: 18705	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAI LESS THAN 5000 CASES				

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C3	116			
LICENSE NAME: RUDD	WINES			
ADDRESS: 241 TOWER	RD			
CITY: AMERICAN CANY	/ON	STATE: CA		
ZIP CODE: 94559	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5199			
LICENSE NAME: RUTZ (CELLARS			
ADDRESS: 1250 MCDO	WELL BLVD			
CITY: PETALUMA		STATE: CA		
ZIP CODE: 94904	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMONV	VEALTH OF MA:			
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORF	PORATION, LLC, PARTNE	RSHIP OR INDIVIDUA	AL)	
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER:				
LICENSE NUMBER: C23	3957				
LICENSE NAME: SALEX	S WINES, LLC				
ADDRESS: 257 WALNU	T STREET				
CITY: NAPA		S ⁻	ГАТЕ: СА		
ZIP CODE:	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	<u>FEE</u>	<u>#</u>	OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS)			

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO THE A	ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAM	IE OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMA	TION NUMBER:			
LICENSE NUMBER: C2493	3			
LICENSE NAME: SAN LUIS	SPIRITS, INC			
ADDRESS: 5330 BELL SPRI	NGS RD			
CITY: DRIPPING SPRINGS		STATE: TX		
ZIP CODE: 78620	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00			

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECKI CODE: CEKI				
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH OF	MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C23	3705			
LICENSE NAME: SARL	ALTO VINUM			
ADDRESS: 16 MIDES 50	330 ZARAGOZA			
CITY:		STATE:		
ZIP CODE:	COUNTRY: SPAIN			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI					
CHECK PAYABLE TO TH	K PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:				
(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER:				
LICENSE NUMBER: C24	4656				
LICENSE NAME: SARL V	/INDEMIO				
ADDRESS: SORGUES 84	1700				
CITY:		STATE:			
ZIP CODE:	COUNTRY: FRANCE				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	# OF PERMITS	COST		
CERTIFICATES OF COMPL					

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ECRT CODE: CERT				
CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	I OF MA:		
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C23	809			
LICENSE NAME: SAXTOI	N RIVER DISTILLERY, LLC			
ADDRESS: 940 SAXTON	S RIVER RD			
CITY: SAXTONS RIVER		STATE: VT		
ZIP CODE: 05154	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE				

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(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECKI CODE: CEKI	RT CODE: CERT					
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	I OF MA:				
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C24	1606					
LICENSE NAME: SCA CH	HEVALLIER					
ADDRESS: 2 RUE JEAN	DDRESS: 2 RUE JEAN BREVET					
CITY:		STATE:				
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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ECRT CODE: CERT					
CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH	OF MA:			
(CHECK MUST DENOTE THE N	AME OF THE LICENSEE CORPORATION,	LLC, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIRM	NATION NUMBER:				
LICENSE NUMBER: C24	138				
LICENSE NAME: SCA DO	MAINE CALENDAL				
ADDRESS: RATEAU 841	ADDRESS: RATEAU 84110				
CITY:		STATE:			
ZIP CODE:	COUNTRY: FRANCE				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
_					
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST		
CERTIFICATES OF COMPLIA					

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C96	547						
LICENSE NAME: SCEA	OOMAINE LAFAGE						
ADDRESS: MAS DURAN	ND CARETEN RO 66140						
CITY:		STATE: FRANCE					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL							

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(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C24	J561						
LICENSE NAME: SCEV H	IAUT PLATEAU						
ADDRESS: RTE DE SOVI	EDE ARGELES						
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)			
CHECK NUMBER:					
IF USED, EPAY CONFIRI	MATION NUMBER:				
LICENSE NUMBER: C24	1558				
LICENSE NAME: SCEV J	EAN PAUL ET BENOIT				
ADDRESS: 14 BIS RUE J	EAN				
CITY: CHABLIS		STATE:			
ZIP CODE:	COUNTRY: FRANCE				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE	FEE	# OF PERMITS	COST		
CERTIFICATES OF COMPL LESS THAN 5000 CAS					

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C25	5209						
LICENSE NAME: SCHOL	IUM PROJECT, LLC						
ADDRESS: 770 SKYWA	COURT						
CITY: NAPA	CITY: NAPA STATE: CA						
ZIP CODE: 94558	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C22	2430							
LICENSE NAME: SCHUG	G WINERY, LLC							
ADDRESS: 602 BONNE	AU ROAD							
CITY: SONOMA	CITY: SONOMA STATE: CA							
ZIP CODE: 95476	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRI	MATION NUMBER:							
LICENSE NUMBER: C20	0070							
LICENSE NAME: SEBAG	O BREWING, CO.							
ADDRESS: 48 SANFORD	DRIVE							
CITY: GORHAM		STATE: ME						
ZIP CODE: 04038	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF I	MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC	, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: CO	134			
LICENSE NAME: SEGHE	SIO WINERIES, INC.			
ADDRESS: 14730 GROV	/E ST.			
CITY: HEALDSBURG		STATE: CA		
ZIP CODE: 95448	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:							
IF USED, EPAY CONFIR	F USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C23	3848						
LICENSE NAME: SELETA	A E BOAZINHA						
ADDRESS: 333 CENTRO), SALINAS MG						
CITY:		STATE:					
ZIP CODE:	COUNTRY: BRAZIL						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C24	1937							
LICENSE NAME: SERVIO	CE DIST., INC							
ADDRESS: 8397 PARIS	STREET							
CITY: LORTON		STATE: VA						
ZIP CODE: 22079	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC, PA	RTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C24	4724							
LICENSE NAME: SG GR	OUP, CORP							
ADDRESS: 290 SPAGNO	OLI RAD							
CITY: MELVILLE		STATE: NY						
ZIP CODE: 11747	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRE	MATION NUMBER:							
LICENSE NUMBER: C23	3144							
LICENSE NAME: SHORT	r'S BREWING, CO.							
ADDRESS: 121 N. BRID	GE ST							
CITY: BELLAIRE		STATE: MI						
ZIP CODE: 49615	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE COR	PORATION, LLC, PARTNE	RSHIP OR INDIVIDUAL))			
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C91	141						
LICENSE NAME: SIERRA	A VISTA VINEYARDS & V	WINER					
ADDRESS: 4560 CABER	NET WAY						
CITY: PACERVILLE		S	TATE: CA				
ZIP CODE: 95667	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	<u>#</u>	OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS		0					

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ECRT CODE: CERT						
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	OF MA:				
(CHECK MUST DENOTE THE N						
CHECK NUMBER:						
IF USED, EPAY CONFIRM	MATION NUMBER:					
LICENSE NUMBER: C23						
LICENSE NAME: SITIOS	LICENSE NAME: SITIOS DE BODEGA					
ADDRESS: 35 RUEDA 47	7490 VALLADLID					
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPLI						

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5180			
LICENSE NAME: SLJ GR	OUP, INC			
ADDRESS: 1260 W. SYC	CAMORE RD			
CITY: MANTENO		STATE: IL		
ZIP CODE: 60950	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	1915			
LICENSE NAME: SMALL	. IMPORTING CO., LLC			
ADDRESS: 120 HEATHE	RWILD			
CITY: PFLUGERVILLE		STATE: TX		
ZIP CODE: 78660	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	IE ABCC OR COM	MMONWEALTH OF	MA:		
(CHECK MUST DENOTE THE I	NAME OF THE LICE!	NSEE CORPORATION, LL	C, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUME	BER:			
LICENSE NUMBER: C23	3039				
LICENSE NAME: SOC. V	INHOS VICTOR	MATOS 11,			
ADDRESS: 2600 CASTA	NHEIRA	DO RIBATEJO			
CITY:			STATE: PORTUGAL		
ZIP CODE:	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL	-	\$200.00			

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORAT	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C22	2542			
LICENSE NAME: SOCIE	DADE AGRICOLA DA HERDAD	DE		
ADDRESS: 7040 IGREJII	NHA			
CITY: ALENTEJO		STATE:		
ZIP CODE:	COUNTRY: PORTUGAL			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE I	NAME OF THE LICEN	SEE CORPORATIO	N, LLC, PARTNER	SHIP OR INDIVIDUA	L)		
CHECK NUMBER:							
IF USED, EPAY CONFIR	MATION NUMB	ER:					
LICENSE NUMBER: C23	3038						
LICENSE NAME: SOCIEI	DADE AGRICOLA	DO CARNEIR	0				
ADDRESS: REPUBLIC 50	0 - 7 B	150-196					
CITY: LISBO			ST	ATE:			
ZIP CODE:	COUNTRY: PO	RTUGAL					
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE		<u>FEE</u>	<u># </u>	OF PERMITS	<u>COST</u>	- -	
CERTIFICATES OF COMPL		\$200.00					

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION, LLC	, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C2	1082						
LICENSE NAME: SOCIE	DADE AGRICOLA E COMERCIAL						
ADDRESS: APARTADO	1 3050 -901						
CITY: MEALHADA		STATE: PORTUGAL					
ZIP CODE:	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL							

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT						
CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	H OF MA:				
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C23	3313					
LICENSE NAME: SONA	WINES, INC.					
ADDRESS: 9119 GRATO	ON ROAD					
CITY: GRATON		STATE: CA				
ZIP CODE: 95444	COUNTRY:					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	TH OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C25	5201			
LICENSE NAME: SOUTH	IERN WINE & SPIRITS			
ADDRESS: 300 BARTON	N RD			
CITY: BARDSTOWN		STATE: KY		
ZIP CODE: 40004	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5200			
LICENSE NAME: SOUTH	HERN WINE & SPIRITS			
ADDRESS: 2900 S 7TH	STREET RD			
CITY: LOUISVILLE		STATE: KY		
ZIP CODE: 40216	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO THE	ABCC OR COMMONWEALTH O	OF MA:		
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CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C22	471			
LICENSE NAME: SOUTH	ERN WINE & SPIRITS			
ADDRESS: VITACURA 43	380			
CITY:		STATE: SANTIAGO		
ZIP CODE:	COUNTRY: CHILE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C23	3407			
LICENSE NAME: SOUTH	HERN WINE GROUP, LLC			
ADDRESS: 1275 COMM	MERCE BLVD			
CITY: AMERICAN CANY	ON	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE NA	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C709	LICENSE NUMBER: C7094 LICENSE NAME: SPIRIT IMPORTS, INC.							
LICENSE NAME: SPIRIT IN								
ADDRESS: 100 CENTRAL	AVE							
CITY: SOUTH KEARNEY		STATE: NJ						
ZIP CODE: 07032	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPLIA LESS THAN 5000 CASES								

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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:							
IF USED, EPAY CONFIRE	MATION NUMBER:						
LICENSE NUMBER: C2	LICENSE NUMBER: C25224 LICENSE NAME: SPIRITS MEXICAN SPIRITS, LLC						
LICENSE NAME: SPIRIT							
ADDRESS: 2526 MANA	DA RD						
CITY: DALLAS		STATE: TX					
ZIP CODE: 75220	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24	LICENSE NUMBER: C24750 LICENSE NAME: SPOTTSWOODE WINERY, INC						
LICENSE NAME: SPOTT							
ADDRESS: 1902 MADR	ONA AVE						
CITY: ST. HELENA		STATE: CA					
ZIP CODE: 94574	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE								
CHECK NUMBER:								
IF USED, EPAY CONFIR								
LICENSE NUMBER: C24	LICENSE NUMBER: C24896 LICENSE NAME: STANFIELD & STUART WINE CO							
LICENSE NAME: STANF								
ADDRESS: 644 HANNA	STREET							
CITY: AMERICAN CANY	ON	ST	TATE: CA					
ZIP CODE:	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FE</u>	<u>E</u> #	OF PERMITS	COST				
CERTIFICATES OF COMPL		0.00						

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C9	935			
LICENSE NAME: STANZ	'A			
ADDRESS: 175 TOWER	ROAD			
CITY: NAPA		STATE: CA		
ZIP CODE: 94558	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRM	MATION NUMBER:							
LICENSE NUMBER: C25	LICENSE NUMBER: C25152							
LICENSE NAME: STOCK	SPIRITS GROUP USA, INC							
ADDRESS: 220 91ST STI	REET							
CITY: NORTH BERGEN		STATE: NJ						
ZIP CODE: 07047	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLI LESS THAN 5000 CASI								

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(CHECK MUST DENOTE THE N								
CHECK NUMBER:								
IF USED, EPAY CONFIRE	MATION NUMBER:							
LICENSE NUMBER: C25	LICENSE NUMBER: C25151							
LICENSE NAME: STOCK	SPIRITS GROUP USA, INC							
ADDRESS: 220 91ST STI	REET							
CITY: NORTH BERGEN		STATE: NJ						
ZIP CODE: 07047	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C22	LICENSE NUMBER: C22114 LICENSE NAME: STONY HILL VINEYARD, INC.						
LICENSE NAME: STONY							
ADDRESS: 1150 DOWD	ELL LANE						
CITY: ST. HELENA		STATE: CA					
ZIP CODE: 94574	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPLI LESS THAN 5000 CASI							

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(CHECK MUST DENOTE THE N							
CHECK NUMBER:							
IF USED, EPAY CONFIRI	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C25	LICENSE NUMBER: C25058 LICENSE NAME: SUPREME WINE & SPIRITS, LLC						
LICENSE NAME: SUPRE							
ADDRESS: 9 SKYLINE D	RIVE						
CITY: HAWTHORNE		STATE: NY					
ZIP CODE: 10532	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO THE	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C231	85							
LICENSE NAME: TASTING	SS IMPORT, CO							
ADDRESS: 910W VAN BA	REN ST 5000							
CITY: CHICAGO		STATE: IL						
ZIP CODE: 60607	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLIA LESS THAN 5000 CASES								

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ECKI CODE: CEKI	CRT CODE: CERT						
CHECK PAYABLE TO TH	HECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORATI	ON, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIRI	MATION NUMBER:						
LICENSE NUMBER: C23							
LICENSE NAME: TERRA	LICENSE NAME: TERRA DE VEREMA						
ADDRESS: EL MOLAR 4	3 736						
CITY:		STATE:					
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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(CHECK MUST DENOTE THE								
CHECK NUMBER:								
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C23847 LICENSE NAME: THE GRATEFUL PALATE, INC							
LICENSE NUMBER: C2								
LICENSE NAME: THE G								
ADDRESS: 2449 S. WA	TNEY WAY							
CITY: FAIRFIELD		STATE: CA						
ZIP CODE: 94533	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRM	ATION NUMBER:							
LICENSE NUMBER: C248	LICENSE NUMBER: C24886 LICENSE NAME: THE IMPORT GROUP LLC							
LICENSE NAME: THE IMP								
ADDRESS: 17 CABLE DRIV	VE #117							
CITY: KEARNEY		STATE: NJ						
ZIP CODE: 07032	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
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CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:						
IF USED, EPAY CONFIRI							
LICENSE NUMBER: C25	LICENSE NUMBER: C25142 LICENSE NAME: THE LITTORIA WINES						
LICENSE NAME: THE LI							
ADDRESS: 4325 SANTA	ADDRESS: 4325 SANTA ROSA AVE						
CITY: SANTA ROSA	CITY: SANTA ROSA STATE: CA						
ZIP CODE: 95407	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER: LICENSE NUMBER: C24066							
IF USED, EPAY CONFIRE								
LICENSE NUMBER: C24								
LICENSE NAME: THE SII	LICENSE NAME: THE SILVERADO VINEYARDS							
ADDRESS: 6121 SILVER	ADO TRAIL							
CITY: NAPA	CITY: NAPA STATE: CA							
ZIP CODE: 94558	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	#	OF PERMITS	COST				
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(CHECK MUST DENOTE THE I	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:							
IF USED, EPAY CONFIRE								
LICENSE NUMBER: C24	LICENSE NUMBER: C24622 LICENSE NAME: THREE ANGELS WINE CELLAR, LLC							
LICENSE NAME: THREE								
ADDRESS: 2803 ORCH	ARD AVE							
CITY: MCMINNVILLE		STATE: OR						
ZIP CODE: 97128	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL LESS THAN 5000 CAS								

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CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
IF USED, EPAY CONFIRI	MATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: TOMAS CUSINE SL						
ADDRESS: 25457 LLEIDA						
CITY:		STATE:				
ZIP CODE:	COUNTRY: SPAIN					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL LESS THAN 5000 CAS						

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(CHECK MUST DENOTE THE N								
CHECK NUMBER:	CHECK NUMBER:							
IF USED, EPAY CONFIRM	F USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24943 LICENSE NAME: TONY NORSKOG							
LICENSE NAME: TONY I								
ADDRESS: 3750 E. WOO	ADDRESS: 3750 E. WOODBRIDGE RD							
CITY: WOODBRIDGE	CITY: WOODBRIDGE STATE: CA							
ZIP CODE: 95258	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPLI LESS THAN 5000 CASI								

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CHECK PAYABLE TO TH	IE ABCC OR COMMONWEALTH OF	MA:						
(CHECK MUST DENOTE THE	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:	CHECK NUMBER: IF USED, EPAY CONFIRMATION NUMBER:							
IF USED, EPAY CONFIR								
LICENSE NUMBER: C24	LICENSE NUMBER: C24797							
LICENSE NAME: TRESC	LICENSE NAME: TRESCH-CLEGET SAS							
ADDRESS: MONTAGNY	LES							
CITY: BEAUNE STATE:								
ZIP CODE: 21200	COUNTRY: FRANCE							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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(CHECK MUST DENOTE THE NA	ME OF THE LICENSEE CORPORATION, L	LC, PARTNERSHIP OR INDIVIDUAL)						
CHECK NUMBER:								
IF USED, EPAY CONFIRM	ATION NUMBER:							
LICENSE NUMBER: C239	07							
LICENSE NAME: TWELVE	PERCENT, LLC							
ADDRESS: 63 FLUSHING	AVE UNIT #237							
CITY: BROOKLYN		STATE: NY						
ZIP CODE: 11205	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLIAI LESS THAN 5000 CASES								

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI						
CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)				
CHECK NUMBER:						
IF USED, EPAY CONFIR						
LICENSE NUMBER: C24						
LICENSE NAME: VARGA	LICENSE NAME: VARGAS ARIZU S. A;					
ADDRESS: LUJAN DE C	UYO					
CITY: MENDOZA	STATE:					
ZIP CODE:	COUNTRY: ARGENTINA					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST			
CERTIFICATES OF COMPL						

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CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA: (CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:					
LICENSE NUMBER: C24						
LICENSE NAME: VIGNOBLE DAMPT						
ADDRESS: 89700 COLL	AN					
CITY:	STATE:					
ZIP CODE:	COUNTRY: FRANCE					
CONTACT NUMBER:						
CONTACT E-MAIL:						
WEBSITE:						
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>			
CERTIFICATES OF COMPL						

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CALENDAR YEAR 2012

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:							
IF USED, EPAY CONFIRE	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24							
LICENSE NAME: VIGNO							
ADDRESS: 33500 NEAC							
CITY:		STATE:					
ZIP CODE:	COUNTRY: FRANCE						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	<u>COST</u>				
CERTIFICATES OF COMPL LESS THAN 5000 CAS							

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CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:	CHECK NUMBER:						
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C24							
LICENSE NAME: VIGNO	LICENSE NAME: VIGNOBLES MICHEL GASSIER						
ADDRESS: 30132 CAISS	ADDRESS: 30132 CAISSARGUES						
CITY:	STATE:						
ZIP CODE:	COUNTRY: SPAIN						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CALENDAR YEAR 2012

ECRI CODE: CERI				
CHECK PAYABLE TO TH				
(CHECK MUST DENOTE THE N				
CHECK NUMBER:				
IF USED, EPAY CONFIRI				
LICENSE NUMBER: C26	5432			
LICENSE NAME: VIGNO	BLES MICHEL GASSIER			
ADDRESS: 30132 CAISS	ARGUES			
CITY:	STATE:			
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH					
(CHECK MUST DENOTE THE I	NAME OF THE LICENSI	EE CORPORATION,	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRE	MATION NUMBER	R:			
LICENSE NUMBER: C23	3321				
LICENSE NAME: VILA V	INITECA NEGOCIA	ANTS, SL			
ADDRESS: AUGULLERS	7	BARCELONA 08003 STATE:			
CITY:					
ZIP CODE:	COUNTRY: SPA	IN			
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	<u>COST</u>	
CERTIFICATES OF COMPL	·	200.00			
LESS THAN 5000 CAS	ES				

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C22	2011			
LICENSE NAME: VILLA	ITALIA GOURMET FOOD&WINE	•		
ADDRESS: 210 LITTLEFI	ELD AVE			
CITY: SOUTH SAN FRAM	NSISCO	STATE: CA		
ZIP CODE: 94080	COUNTRY: 94080			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	· · · · · · · · · · · · · · · · · · ·			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C22	2563			
LICENSE NAME: VIN-TE	ELLIGENCE, LLC			
ADDRESS: 2220 91ST				
CITY: N. BERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALTH	H OF MA:		
(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	5064			
LICENSE NAME: VINE C	LIFF WINERY			
ADDRESS: 7400 SILVER	ADO TRAIL			
CITY: NAPA		STATE: CA		
ZIP CODE: 94558	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE N	AME OF THE LICE	NSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIRM	NUM NOITAN	BER:			
LICENSE NUMBER: C24	467				
LICENSE NAME: VINO D	IRECT, LLC				
ADDRESS: 3605 LONG B	EACH BLVD	STE 200			
CITY: LONG BEACH			STATE: CA		
ZIP CODE: 90807	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIA LESS THAN 5000 CASE	_	\$200.00			

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CHECK PAYABLE TO THE ABCC	OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAME OF	THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMATION	N NUMBER:			
LICENSE NUMBER: C22028				
LICENSE NAME: VINOCE VINE	YARDS, LLC			
ADDRESS: 1166 COMMERCE E	SLVD STE. D			
CITY: AMERICAN CANYON		STATE: CA		
ZIP CODE: 94503 COU	NTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLIANCE LESS THAN 5000 CASES	\$200.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE	CORPORATION, LLC, PARTN	ERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER	:			
LICENSE NUMBER: C2	3310				
LICENSE NAME: VINOS	AND GOURMET, I	NC.			
ADDRESS: 3701 COLLIN	NS AVE	UNIT 7B			
CITY: RICHMOND		S	STATE: CA		
ZIP CODE: 94806	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE]	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS	·	00.00			

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CHECK PAYABLE TO THE A	ABCC OR COMMONWEALTH	OF MA:		
(CHECK MUST DENOTE THE NAM	IE OF THE LICENSEE CORPORATION	, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRMA	TION NUMBER:			
LICENSE NUMBER: C2421	0			
LICENSE NAME: VL VENTU	JRES, LLC			
ADDRESS: 125 MEZZETA (COURT			
CITY: AMERICAN CANYON	I	STATE: CA		
ZIP CODE: 94503	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLIAN LESS THAN 5000 CASES	CE \$200.00			

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CHECK PAYABLE TO TH	E ABCC OR COMMONWEALT	ГН OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATI	ION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C9:	160			
LICENSE NAME: VOLUE	BILIS IMPORTS, INC.			
ADDRESS: 2220 91ST				
CITY: NORTH BERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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CHECK PAYABLE TO TH	IE ABCC OR COM	MONWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENS	EE CORPORATION, LLC, PAR	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBE	R:			
LICENSE NUMBER: C2	3727				
LICENSE NAME: VOTTO	VINES IMPORTI	NG, LLC			
ADDRESS: 35 CORP RIE	OGE,	UNIT 10			
CITY: HAMDEN			STATE: CT		
ZIP CODE: 06514	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL		\$200.00]

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(CHECK MUST DENOTE THE I	NAME OF THE LICENSEE CORPORATION	I, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C98	827			
LICENSE NAME: W. J. D	DEUTSCH & SONS, LTD.			
ADDRESS: CHATEAU LE	OVILLE BARTON			
CITY: ST. JULIEN		STATE: FRANCE		
ZIP CODE:	COUNTRY: FRANCE			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICE	NSEE CORPORATION	ON, LLC, PARTNERS	SHIP OR INDIVIDUA	L)		
CHECK NUMBER:							
IF USED, EPAY CONFIRM	MATION NUME	BER:					
LICENSE NUMBER: C24	1242						
LICENSE NAME: WALNU	UT CITY WINEV	WORKS,					
ADDRESS: 2900 PRINGI	LE STREET	SE					
CITY: SALEM			STA	ATE: OR			
ZIP CODE: 97302	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE		<u>FEE</u>	<u># (</u>	OF PERMITS	COST		
CERTIFICATES OF COMPLI LESS THAN 5000 CASI	-	\$200.00					

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CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C24	4948			
LICENSE NAME: WATTI	LE CREEK WINERY			
ADDRESS: 10101 SHILO	OH ROAD			
CITY: CLOVERDALE		STATE: CA		
ZIP CODE: 95425	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5176			
LICENSE NAME: WI, IN	С			
ADDRESS: LUNDOCH S	OUTH			
CITY:		STATE:		
ZIP CODE: 53351	COUNTRY: AUSTRALIA			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	5231			
LICENSE NAME: WI, IN	С			
ADDRESS: MARANANO	GA VIA TANUND			
CITY: ATLANTA		STATE: GA		
ZIP CODE: 30328	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPO	DRATION, LLC, PARTNERSHIP OR INDIVI	DUAL)	
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: CO	126			
LICENSE NAME: WILLA	METTE VALLEY VINEYAR	DS		
ADDRESS: 8800 ENCHA	NTED WAY SE			
CITY: TURNER		STATE: OR		
ZIP CODE: 97392	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPORATION	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRI	MATION NUMBER:			
LICENSE NUMBER: C36	554			
LICENSE NAME: WINE I	IS FINE			
ADDRESS: 2145 E FIRES	STONE BLVD			
CITY: SOUTH GATE		STATE: CA		
ZIP CODE: 90280	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

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(CHECK MUST DENOTE THE N	IAME OF THE LICENSEE CORPORATI	ON, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRM	MATION NUMBER:			
LICENSE NUMBER: C25	6076			
LICENSE NAME: WINE	MARKETS INT., INC.			
ADDRESS: 2220 91ST ST	TREET			
CITY: NORTH BERGEN		STATE: NJ		
ZIP CODE: 07047	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASE				

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(CHECK MUST DENOTE THE N	NAME OF THE LICENSEE CORPOR	ATION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIRE	MATION NUMBER:			
LICENSE NUMBER: C24	1950			
LICENSE NAME: WINE	WORLDWIDE, INC			
ADDRESS: 59 NORTH P	UTT CORNERS R			
CITY: NEW PALTZ		STATE: NY		
ZIP CODE: 12561	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPLI LESS THAN 5000 CASI				

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(CHECK MUST DENOTE THE N	NAME OF THE LICE	NSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIV	'IDUAL)	
CHECK NUMBER:					
IF USED, EPAY CONFIRM	MATION NUM	BER:			
LICENSE NUMBER: C24	1036				
LICENSE NAME: WOOD	HOUSE FAMIL	Y CELLARS, INC			
ADDRESS: 15500 WOO	D RED RD	NE STE C60	0		
CITY: WOODINVILLE			STATE: WA		
ZIP CODE: 98072	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	Γ
CERTIFICATES OF COMPLI LESS THAN 5000 CASI	_	\$200.00			

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(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATIO	N, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4949			
LICENSE NAME: WORL	D WIDE WINE, LLC			
ADDRESS: 1099 PRATT	STREET			
CITY: NAPERVILLE		STATE: IL		
ZIP CODE: 60563	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	FEE	# OF PERMITS	COST	
CERTIFICATES OF COMPL LESS THAN 5000 CAS				

YOU MUST MAIL THIS TRANSMITTAL FORM ALONG WITH YOUR CHECK AND COMPLETED RENEWAL APPLICATION TO:



www.mass.gov/abcc

APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT				
CHECK PAYABLE TO TH	IE ABCC OR COMMONWEA	LTH OF MA:		
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORA	TION, LLC, PARTNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:				
IF USED, EPAY CONFIR	MATION NUMBER:			
LICENSE NUMBER: C2	4800			
LICENSE NAME: WORL	DWIDE BEVERAGE IMPORT	S,		
ADDRESS: 4101 WHITE	SIDE STREET			
CITY: LOS ANGELES		STATE: CA		
ZIP CODE: 90063	COUNTRY:			
CONTACT NUMBER:				
CONTACT E-MAIL:				
WEBSITE:				
LICENSE TYPE	<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL				

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRI CODE: CERI					
CHECK PAYABLE TO TH	E ABCC OR COM	ONWEALTH OF MA:			
(CHECK MUST DENOTE THE	NAME OF THE LICENSE	E CORPORATION, LLC, PAR	TNERSHIP OR INDIVIDUAL)		
CHECK NUMBER:					
IF USED, EPAY CONFIR	MATION NUMBER	R:			
LICENSE NUMBER: C24	4431				
LICENSE NAME: WORT	HWHILE WINE CO	., LLC			
ADDRESS: 931 PONCE	DE LEON AVE	STE E			
CITY: ATLANTA			STATE: GA		
ZIP CODE: 30306	COUNTRY:				
CONTACT NUMBER:					
CONTACT E-MAIL:					
WEBSITE:					
LICENSE TYPE		<u>FEE</u>	# OF PERMITS	COST	
CERTIFICATES OF COMPL	•	200.00			

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APPLICATION FOR RENEWAL OF A CERTIFICATE OF COMPLANCE

(M.G.L. c. 138 §18B)

CALENDAR YEAR 2012

ECRT CODE: CERT							
CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:						
(CHECK MUST DENOTE THE	NAME OF THE LICENSEE CORPORATION	N, LLC, PARTNERSHIP OR INDIVIDUAL)					
CHECK NUMBER:							
IF USED, EPAY CONFIR	IF USED, EPAY CONFIRMATION NUMBER:						
LICENSE NUMBER: C2	4778						
LICENSE NAME: YVES,	INC						
ADDRESS: 5 MAIN STR	EET						
CITY: BRISTOL	CITY: BRISTOL STATE: VT						
ZIP CODE: 05443	COUNTRY:						
CONTACT NUMBER:							
CONTACT E-MAIL:							
WEBSITE:							
LICENSE TYPE	FEE	# OF PERMITS	COST				
CERTIFICATES OF COMPL							

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CALENDAR YEAR 2012

ECRI CODE: CERI								
CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)								
CHECK NUMBER:								
IF USED, EPAY CONFIR	MATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24917 LICENSE NAME: ZIDIAN IMPORTS ADDRESS: 65 COITSVILLE HUBBARD RD							
LICENSE NAME: ZIDIAN								
ADDRESS: 65 COITSVIL								
CITY: YOUNGSTOWN		STATE: OH						
ZIP CODE: 44505	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPL								

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ECRT CODE: CERT								
CHECK PAYABLE TO TH	CHECK PAYABLE TO THE ABCC OR COMMONWEALTH OF MA:							
(CHECK MUST DENOTE THE N	(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP OR INDIVIDUAL)							
CHECK NUMBER:								
IF USED, EPAY CONFIRM	IF USED, EPAY CONFIRMATION NUMBER:							
LICENSE NUMBER: C24	LICENSE NUMBER: C24745							
LICENSE NAME: ZOD, L	LICENSE NAME: ZOD, LLC							
ADDRESS: 22/24 WEST	UNION STREET							
CITY: ATHENS	STATE: OH							
ZIP CODE: 45701	COUNTRY:							
CONTACT NUMBER:								
CONTACT E-MAIL:								
WEBSITE:								
LICENSE TYPE	FEE	# OF PERMITS	COST					
CERTIFICATES OF COMPLI LESS THAN 5000 CASI								

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